



ANNUAL REPORT
of the
JOINT COMMITTEE ON
CORRECTIONS
of the
MISSOURI GENERAL ASSEMBLY

January 2015

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REPRESENTATIVES:
LINDA BLACK
BRANDON ELLINGTON
PAUL FITZWATER
PENNY HUBBARD
SHAWN RHOADS
VACANT



SENATORS:
S. KIKI CURLS
MIKE KEHOE
PAUL LEVOTA
JAMILAH NASHEED
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To All Senators, Representatives, and Staff:

It is our pleasure to present the Joint Committee on Corrections Annual Report for 2015. This report is provided pursuant to Section 21.465, RSMo.

The Joint Committee on Corrections is a permanent committee of the General Assembly. The committee was established in 1957 by an act of the Sixty-Ninth General Assembly. The applicable statutory provisions may be found in Sections 21.440 to 21.465 of the Revised Statutes of Missouri. The committee is bipartisan in composition and is composed of six members each from the House of Representatives and the Senate.

This report provides detailed information received by the Joint Committee from each of the correctional facilities maintained by the Department of Corrections. We hope you find the Annual Report informative.

Annual Report of the Joint Committee on Corrections, January 2015

Introduction

The Joint Committee on Corrections presents information for the following correctional facilities as required by law.

- [Algoa Correctional Center in Jefferson City](#),
- [Boonville Correctional Center in Boonville](#),
- [Chillicothe Correctional Center in Chillicothe](#),
- [Cremer Therapeutic Community Center in Fulton](#),
- [Crossroads Correctional Center in Cameron](#),
- [Eastern Reception, Diagnostic, and Correctional Center in Bonne Terre](#),
- [Farmington Correctional Center in Farmington](#),
- [Fulton Reception/Diagnostic Center in Fulton](#),
- [Jefferson City Correctional Center in Jefferson City](#),
- [Maryville Treatment Center in Maryville](#),
- [Missouri Eastern Correctional Center in Pacific](#),
- [Moberly Correctional Center in Moberly](#),
- [Northeast Correctional Center in Bowling Green](#),
- [Ozark Correctional Center in Fordland](#),
- [Potosi Correctional Center in Mineral Point](#),
- [South Central Correctional Center in Licking](#),
- [Southeast Correctional Center in Charleston](#),
- [Tipton Correctional Center in Tipton](#),
- [Western Missouri Correctional Center in Cameron](#),
- [Western Reception, Diagnostic, and Correctional Center in St. Joseph](#), and
- [Women's Eastern Reception, Diagnostic and Correctional Center in Vandalia](#).

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Algoa Correctional Center				
Custody Level	C-1 C-2		Warden	Scott A. Lawrence
Total Acreage	340		Address	8501 No More Victims Road, Jefferson City, Missouri 65101-4567
Acreage w/in Perimeter	22			
Square Footage	329,360		Telephone:	573-751-3911
Year Opened	1932		Fax:	573-526-1385
Operational Capacity/Count (as of December 1, 2014)	1537/1509			
General Population Beds (capacity and count as of December 1, 2014)	1467/1411		Deputy Warden	William Schmutz
Segregation Beds (capacity and count as of December 1, 2014)	98/97		Deputy Warden	Louisa Bolinger
Treatment Beds (capacity and count as of December 1, 2014)	N/A		Asst. Warden	Sandra Jimmerson
Work Cadre Beds (capacity and count as of December 1, 2014)	N/A		Asst. Warden	
Diagnostic Beds (capacity and count as of December 1, 2014)	N/A		Major	William Vallier
Protective Custody Beds (capacity and count as of December 1, 2014)	0			

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? **Good, the overall condition of this facility is good.**
- b. What capital improvement projects do you foresee at this facility over the next six years?
 - **New medical/visiting building**
 - **Upgrade Del Norte System**
 - **Metal roofs for housing units**
 - **Sewer/storm drain project to replace clay tile and manholes**
 - **Pave Cortez Road, perimeter road and parking lots. General overall paving or sealing of parking lots**
 - **Install new windows throughout the facility**
 - **Install chiller in the administration building and remove window AC units**

c. How critical do you believe those projects are to the long-term sustainability of this facility?

- **Building a new medical unit is critical as the unit is now located on the third floor of a housing unit which is very difficult to transport offenders and/or equipment. It is difficult to access and the space is very limited.**
- **The motion detector for the fence is obsolete – service and parts are becoming impossible to obtain. A new system will need to be purchased to maintain perimeter security.**

2. **Staffing:**

- a. Do you have any critical staff shortages?
- **Yes, Office Support Assistants and Cooks – Correction Officers – additional FTE's would enhance security**
- **Difficult to attract – low wages**
- **Correction Officers – additional FTE's would enhance security**
- b. What is your average vacancy rate for all staff and for custody staff only?
 - **All staff 4%**
 - **All custody 4%**
(Calculated by number of vacancies divided by total staff)
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?
 - **Yes, comp time accrual and usage contributes to additional hours worked by staff and sometimes lower morale if there is no relief.**
- d. What is the process for assigning overtime to staff?
 - **Volunteers to work overtime are sought first to work overtime. If more staff is needed a mandatory overtime rotation list is utilized to determine whose turn it is to work. This is seldom necessary as staff generally volunteer due to regular comp pay outs.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 73% of comp time accrued is paid off; 27% is used.**
- f. Is staff able to utilize accrued comp-time when they choose?
 - **As comp pay off for COI/COII – yes**
 - **As comp pay off for other staff – no**
 - **As time off – yes when posts can adequately be covered**

3. **Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school?
 - **339 students enrolled – 22.8% of the offender population**
- b. How many (and %) of inmate students earn their HSE each year in this institution?
 - **This year so far, we had 58 HSE's (17%). This number is not a completely accurate look at how many ACC students earn their HSE each year because of the change from GED to HSE. The average number of HSE's is closer to 85 a year (25% of students).**
- c. What are some of the problems faced by offenders who enroll in education programs?
 - **The issue that most offenders face when they enroll in school is the length of time it has been since they were in school last. The longer you are away from using these skills, the longer it takes to relearn them. This frustrates the offenders; leading to unresponsiveness in the classroom and an unwillingness to work with the teachers. This slows down their progress towards earning their HSE, or**

possibly missing the opportunity because they run out of time with us here at ACC.

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?
 - **AA/NA**
- b. How many beds are allocated to those programs?
 - 0
- c. How many offenders do those programs serve each year?
 - 0
- d. What percent of offenders successfully complete those programs?
 - 0
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?
 - **In our case, budgetary constraints made it very difficult to continue the program. The biggest challenge faced during the substance abuse programming was the offender's resistance to placement because it did not satisfy their parole stipulations.**

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution?
 - **We have three vocational education programs at ACC: Culinary Arts, Web Design and Auto Mechanics**
- b. How many offenders (and %) participate in these programs each year?
 - **Auto Mechanics 240 = 16.16%**
 - **Culinary Arts 173 = 11.65%**
 - **Web Design 102 = 6.87%**
- c. Do the programs lead to the award of a certificate?
 - **These programs do lead to award of a certificate: Culinary Arts receive a Department of Labor certificate and a Serve Safe certificate; Auto Mechanics and Web Design both receive a Department of Labor certificate.**
- d. Do you offer any training related to computer skills?
 - **Web Design offers training in computer skills**

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution?
 - **ACC offenders work at CMCC Tire Recycling**
- b. How many (and %) of offenders work for MVE at this site?
 - **18 which is .075%**
- c. Who are the customers for those products?
 - **DNR – Recycling of rubber waste products; University of Missouri at Columbia - tire derived fuel**
 - **Correctional facilities and other state agencies such as MoDot receive recyclable rubber waste products**
- d. What skills are the offenders gaining to help them when released back to the community?
 - **Basic work ethics and disciplined work habits; operation of warehouse machinery, i.e. forklift tire de-beader, tire de-rimmer, and rubber tire loader**
 - **Organizational skills involving officer operations**

- Product handling in a warehouse setting
- Maintenance skills

7. Medical Health Services:

- Is the facility accredited by the National Commission on Correctional Health Care?
 - Yes, re-accreditation in November 2011
- How many offenders are seen in chronic care clinic?
 - 698
- What are some examples of common medical conditions seen in the medical unit?
 - Dental, sports injuries, common illnesses (colds, sinus infections, allergies)
- What are you doing to provide health education to offenders?
 - Post pamphlets
 - We provide an annual health fair and education during the sick call process, and have various handouts available in the medical unit.
 - Offer smoking cessation classes
 - Offer counseling sessions with nurses on medical conditions, medications, etc.
- Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?
 - No
- Is the aging of the population affecting health care in prisons as it is affecting health care everywhere else? If yes, please explain
 - Yes, we are seeing patients with more chronic/terminal illnesses.

8. Mental Health Services:

- How do offenders go about obtaining mental health treatment services?
 - The first and preferred method of obtaining MH services is through Health Services Request (Medical Services Request). The second method is through a personal request to a caseworker or custody officer who forwards the request. A third method may occur through staff observation and referral of an offender in obvious medical distress.
- How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?
 - ACC has had no completed suicides in the last year. Staff are being educated about suicide prevention during annual CORE training sessions. Staff are asked to be sensitive or aware of offenders who may have problems or suicidal inclinations, and are educated as to the proper suicide notification and placement policy.
- Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?
 - The percentage has remained consistent to approximately 20% for the past 5 years
- How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?
 - This is more complicated than just giving a number. Of the roughly 300 or so offenders regularly being prescribed medications and who are also given a diagnosis, perhaps 50 of them could be considered to have a "serious" mental illness; whereas the others would more often than not have some type of mental health problem or concern. By contract, they are required to see a psychiatrist or nurse practitioner every 90 days and a therapist or psychologist every 30 days. We

strongly encourage mental health groups and other activities and programs to promote good mental health. Roughly 90% of the offenders in our Mental Health program are being prescribed some type of medications. The other 10% have decided they no longer need medications while here at ACC.

9. What is your greatest challenge in managing this institution? **Recruiting and retaining quality staff, monetary restraints due to challenging budgetary issues, and core cuts requiring operations of the institution with less staff which affects optimum security.**
10. What is your greatest asset to assist you in managing this institution? **Without a doubt, the greatest asset of ACC is the staff as ACC has a lot of experienced and dedicated veteran staff. ACC staff takes their job seriously, and are very proud of their accomplishments and continue to strive to provide excellent service to our offenders and the citizens of Missouri in an effort to maintain public safety. I would also have to add that the ACC staff are professional, courteous and friendly to one another and visitors.**
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) **Most vehicles are getting old and worn with very high mileage.**
12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **The custody staff's morale at ACC is fairly high as employees generally believe supervisors are considerate of their needs. Leave time is granted fairly, lines of communication are kept open and internal issues are quickly addressed. In addition, regular comp time pay outs have significantly helped reduced stress and improve job satisfaction.**
13. **Case Managers:**
 - A. How many case managers are assigned to this institution?
 - **23**
 - B. Do you currently have any case manager vacancies?
 - **No**
 - C. Do the case managers accumulate comp-time? **Only on rare occasions.**
 - D. Do the case managers at this institution work alternative schedules?
 - **Yes, the Restorative Justice Coordinator alters his schedule approximately once per month for ICVC panels.**
 - E. How do inmates gain access to meet with case managers?
 - **We have open door during open movement in the mornings from 8:00 am until 10:45 am and again from 12:30 pm until 3:45 pm.**
 - F. Average caseload size per case manager? **82 offenders**
 - # of disciplinary hearings per month? **343**
 - # of IRR's and grievances per month? **36 IRR's and 18 Grievances**
 - # of transfers written per month? **77**
 - # of re-classification analysis (RCA's) per month? **230**
 - G. Are there any services that you believe case managers should be providing, but are not providing? **All required programs are being conducted.**
 - H. If so, what are the barriers that prevent case managers from delivering these services? **Space and time to facilitate classes that does not interfere with their normally assigned duties, training, etc.**
 - I. What type of inmate programs/classes are the case managers at this institution involved in? **Assisting offenders with obtaining birth certificates, driver's license, social security and**

state identification cards, work release program, Pathway to Change, Anger Management, and Impact of Criminal Thinking classes, video resumes, and Employability Skills/Life Skills classes that are scheduled for future implementation

J. What other duties are assigned to case managers at this institution? **Transitional Accountability Plans and other reentry services, distribution of legal and censored mail forms, pin number issues, disciplinary hearings, ad-seg referrals, case management meetings, file reviews, process visiting applications, update files for release, offender detainer/critical illness/death notifications, institutional inspections, assistance with obtaining home plans, assistance during food visits, completion of vocational education applications, and investigations.**

14. Institutional Probation and Parole officers:

- A. How many parole officers are assigned to this institution? **6**
- B. Do you currently have any staff shortages? **No**
- C. Do the parole officers accumulate comp-time? **No**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **Yes**
- E. How do inmates gain access to meet with parole officers? **Open door is Monday – Friday from 9 am – 10 am**
- F. Average caseload size per parole officer? **250**
 - # of pre-parole hearing reports per month? **70**
 - # of community placement reports per month? **10-12**
 - # of investigation requests per month? **125**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **No**
- H. If so, what are the barriers that prevent officers from delivering these services? **N/A**
- I. What type of inmate programs/classes are the parole officers at this institution involved in? **We have one probation officer assigned to the Transitional Housing Unit.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **No**

16. Does your institution have saturation housing? If so, how many beds? **No**

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? **310**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes, we have 700+ batteries available.**
- c. Are the conditioners/rechargers in good working order? **Yes**

Joint Committee on Corrections

Data as of 12-23-14

Information for Legislative Institutional Visits

Facility Name: Boonville Correctional Center				
Custody Level	1 (BCC) Low (BTC)		Warden	Jeff Norman
Total Acreage	547		Address	1216 East Morgan
Acreage w/in Perimeter	55			Boonville, MO 65233
Square Footage	325,719		Telephone:	660-882-6521
Year Opened	1983		Fax:	660-882-7825
Operational Capacity/Count (as of November 30, 2012)	1346 Capacity 1280 Count			
General Population Beds (capacity and count as of November 30, 2012)	1154 Capacity 1038 Count		Deputy Warden/ Offender Management	Eileen Ramey
Segregation Beds (capacity and count as of November 30, 2012)	98 Capacity 89 Count		Deputy Warden/ Operations	Becky Ehlers
Treatment Beds (capacity and count as of November 30, 2012)	102 (SIP*) Capacity 91 (SIP*) Count 30 (TVP**) Capacity 02 (TVP**) Count 60 (BTC***) Capacity 60 (BTC***) Count		Asst. Warden	Justin Page
Work Cadre Beds (capacity and count as of November 30, 2012)	78 Capacity		Asst. Warden	
Diagnostic Beds (capacity and count as of November 30, 2012)			Major	Jerry Garnett
Protective Custody Beds (capacity and count as of November 30, 2012)				

***Shock Incarceration Program**

****Technical Violator Program**

*****Boonville Treatment Center**

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? **Good**
- b. What capital improvement projects do you foresee at this facility over the next six years?
Food Service renovations, smoke stack demolition, HU-5 roof, street overlay and gym roof repairs.
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
Very important

2. **Staffing:**

- a. Do you have any critical staff shortages? **Corrections Officer I and Cook position are critical staff shortages.**
- b. What is your average vacancy rate for all staff and for custody staff only?
Custody = Average of 6 vacancies per month
Non-custody = Average of 3 vacancies per month
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?
Somewhat. We are always mindful that due to training, holidays, deer season, etc. our shifts may run short. Shift commanders use their best judgment when working additional staff on overtime.
- d. What is the process for assigning overtime to staff? **There are two overtime lists currently utilized; the first is a volunteer list. Officers can volunteer for overtime prior to being mandated. This list is the first to be utilized. The second list is a mandatory overtime list this list is used as a last resort. If no custody staff members volunteer for overtime, the mandatory list is used. Similar overtime list also used for food services.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 73% of comp time accrued is paid off; 27% is used.**
- f. Is staff able to utilize accrued comp-time when they choose? **Due to current staffing patterns, custody staff and food service staff members very rarely have the opportunity to utilize accrued compensatory time when they choose.**

3. **Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school? **Approximately 344 offenders are enrolled in the HSE education program. That represents approximately 26% of our general population.**
- b. How many (and %) of inmate students earn their HSE each year in this institution? **HSE certificates are awarded to approximately 160 (12.28%) offenders per year. This includes numbers from BTC.**
- c. What are some of the problems faced by offenders who enroll in education programs? **The problems confronted by offenders are numerous and varied. The most common are:**
 - a) **A lack of motivation because the offenders have not succeeded in the public school system and don't expect that they can succeed in any school, including DOC schools;**
 - b) **General behavior problems due to disrespect of authority. The students are unwilling to take direction from faculty.**
 - c) **Cognitive problems due to substance abuse.**

4. **Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have?
Short-term 120 Court and 84-day day board
- b. How many beds are allocated to those programs? **60**
- c. How many offenders do those programs serve each year? **180**
- d. What percent of offenders successfully complete those programs? **89%**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? **Environment is not conducive to positive change as there are no incentives, poor physical environment, no means to separate those who want help and those who just want out.**

5. **Vocational Programs:**

- a. What types of vocational education programs are offered at this institution? **N/A**

- b. How many offenders (and %) participate in these programs each year?
- c. Do the programs lead to the award of a certificate?
- d. Do you offer any training related to computer skills?

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution? **N/A**
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes.**
- b. How many offenders are seen in chronic care clinics? **600.**
- c. What are some examples of common medical conditions seen in the medical unit? **High blood pressure, diabetes, HIV, Hepatitis, obesity, and cancer.**
- d. What are you doing to provide health education to offenders? **All of the offenders in the chronic care clinics receive education related to their problems, we have an annual health fair where we offer education on multiple topics, and if an offender has a request for a specific topic we attempt to obtain information for them.**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? **No.** If so, how did you respond? **N/A**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain. **Due to our physical facility and the access to the buildings and stairs, we are limited on what offenders can be housed at this site.**

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services? **Offenders fill out a Medical Services Request and mark the Mental Health box.**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **There were no successful suicides in the past year. Suicide prevention is addressed through staff training to recognize signs and symptoms as well as how to respond when notified of suicidal ideations. Offenders who have identified themselves as having suicidal ideations receive regular follow ups to ensure their continued safety.**
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **There are no offenders (0%) on psychotropic medications at this facility.**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? **There are no chronically mentally ill offenders at this institution. If an offender is identified as needing psychotropic medications they are moved to a different institution that can meet their needs. All offenders at this institution may access regular counseling services if desired.**

9. What is your greatest challenge in managing this institution? **Our facility is an old institution and the staffing for our custody ranks of Corrections Officer I and Corrections Officer II is shallow. Buildings and infrastructure are aged and require upkeep by both funds and manpower.**

10. What is your greatest asset to assist you in managing this institution? **This facility is staffed with numerous veteran staff. The section heads are experienced and have a wealth of knowledge.**

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) **BCC currently has a fleet of older vehicles with high mileage. Our garage supervisor works diligently to keep each vehicle on the road. Fleet ranges from 1985-2008.**

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **Custody staff morale is medium+. Custody supervisors have been redirected to focus on the reduction of mandatory overtime, officer retention, staff recognition, and institutional pride.**

13. **Caseworkers:**

- A. How many caseworkers are assigned to this institution? **BCC = 18 BTC = 1 CCA's =2**
- B. Do you currently have any caseworker vacancies? **2- CCM 1-CCA**
- C. Do the caseworkers accumulate comp-time? **They flex time gained from evening program hours.**
- D. Do the caseworkers at this institution work alternative schedules? **No.**
- E. How do inmates gain access to meet with caseworkers? **Open door.**
- F. Average caseload size per caseworker? **80**
 - # of disciplinary hearings per month? **243**
 - # of IRR's and grievances per month? **IRR = 81.5 Grievances = 28.3**
 - # of transfers written per month? **61**
 - # of re-classification analysis (RCA's) per month? **165**
- G. Are there any services that you believe caseworkers should be providing, but are not providing? **No. We provide all the CORE programs at this time.**
- H. If so, what are the barriers that prevent caseworkers from delivering these services? **N/A**
- I. What type of inmate programs/classes are the caseworkers at this institution involved in? **Pathways to Change, Inside Out Dads, ICVC, Anger Management, Puppies for Parole**
- J. What other duties are assigned to caseworkers at this institution? **Grievance Officer, RJ/ICVC Coordinator, assist with laundry coverage, searches.**

14. **Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution? **1 District Administrator, 1 P&P Officer III and 8 P& P Officer II**
- B. Do you currently have any staff shortages? **No.**
- C. Do the parole officers accumulate comp-time? **Generally not.**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **The officers flex their time and work alternate schedules to prevent the accumulation of comp time**
- E. How do inmates gain access to meet with parole officers? **Both through written notes to the parole officer or during open door schedules**
- F. Average caseload size per parole officer? **75-150 depending on type of caseload (Treatment Program, SIP, or General Population)**
 - # of pre-parole hearing reports per month? **55**
 - # of community placement reports per month? **10**
 - # of investigation requests per month? **68 in state, 10 out of state**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **No**
- H. If so, what are the barriers that prevent officers from delivering these services? **N/A**

I. What type of inmate programs/classes are the parole officers at this institution involved in?
Pathway to Change, Pre-release Briefings and Employability Skills once classes are scheduled

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **BCC staff take great pride in providing public safety to the community. All state employees feel at this time pay raises are scarce and staff are continually asked to do more with less.**

16. Does your institution have saturation housing? If so, how many beds? **No**

17. **Radio/Battery Needs:**

- a. What is the number of radios in working condition? **249**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes.**
- c. Are the conditioners/rechargers in good working order? **Yes.**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Chillicothe Correctional Center			
Custody Level	Minimum/Maximum	Warden	Alana C. Boyles
Total Acreage	140	Address	3151 Litton Road
Acreage w/in Perimeter	60		Chillicothe, MO 64601
Square Footage	450,000	Telephone:	660-646-4032
Year Opened	2008	Fax:	660-646-1217
Operational Capacity/Count (as of December 15, 2014)	*1340 Capacity 1326 Count		
General Population Beds (capacity and count as of December 15, 2014)	1084 Capacity 1074 Count	Deputy Warden	Darin Morgan Deputy Warden of Offender Management
Segregation Beds (capacity and count as of December 20, 2013)	*76 Capacity 58 Count	Deputy Warden	David Barnett Deputy Warden of Operations
Treatment Beds (capacity and count as of December 15, 2014)	256 Capacity 252 Count	Asst. Warden	Lonny Bartz, Acting Assistant Warden
Work Cadre Beds (capacity and count as of December 20, 2013)	0/0 (Included in General Population Beds)	Asst. Warden	
Diagnostic Beds (capacity and count as of December 20, 2013)	200 Capacity 0 Count	Major	Courtney Schweder Chief of Custody
Protective Custody Beds (capacity and count as of December 20, 2013)	0/0 (Included in Segregation Beds)		
*76 Ad Seg beds not currently in our operational capacity count			

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution?
The overall condition of the facility is good.
- b. What capital improvement projects do you foresee at this facility over the next six years?
Convert perimeter and wall pack lighting over to LED lighting to conserve energy and reduce our environmental footprint. Concrete repair to the rear sally port and rear access road. Replacement of food service tile floor to an epoxy flooring. Install a waterless fire system in the main data security room. Re-coat the inside of the water tower. Add a blending system to our domestic hot water loop. Look at upgrading the camera system within the facility. Replace and upgrade the fire system computer. Resurface the facilities parking lot. Upgrade the perimeter fence system to fiber system.
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
The two critical projects that we foresee would be the waterless fire protection system for the main data security room and the interior coating of the water tower. The main data security room currently has a water system in place at this time. If this system is discharged it could destroy all of our critical electronic security and data system

components for the entire facility. If the water tower is not re-coated, it will impact the health and safety of our occupants and the integrity of the water sphere itself.

2. Staffing:

a. Do you have any critical staff shortages?

No , but be aware we are having difficulty filling positions for Cook I-II and Cook III's as we currently have two vacancies for each.

b. What is your average vacancy rate for all staff and for custody staff only?

- Average vacancy rate for all staff (December 1, 2013 through November 30, 2014):**

Average total vacancies per month = 9.83

Average number of positions vacated per month = 4.33

- Average vacancy rate for custody staff (December 1, 2013 through November 30, 2014):**

Average total vacancies per month = 3.83

Average number of positions vacated per month = 2.42

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

There is no significant impact on management of the facility.

d. What is the process for assigning overtime to staff?

Volunteers are solicited to cover overtime needs. If no volunteers are found, staff are mandated to cover necessary overtime.

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

Approximately 52% of comp time accrued is paid off; 48% is used.

f. Is staff able to utilize accrued comp-time when they choose?

Every effort is made for staff to take the time the same work week as it is earned if they want. In this way, those individuals particularly who earn time and a half if it carries over into the week, are only taking actual time worked.

3. Education Services:

a. How many (and %) of inmate students at this institution are currently enrolled in school?

Gross E2-E5	Available & Eligible E2-E5	Enrollment in School	Seats Available	Enrollment as % of Available & Eligible	Enrollment as % of Seats Available
401	362	275	285	76%	96%

b. How many (and %) of inmate students earn their HSE each year in this institution?

Fiscal Year	Passed HSE	Attempted HSE	CCC Pass Rate
2010	104	124	84.00%
2011	98	116	85.00%
2012	87	97	90.00%
2013	68	70	97.00%
2014	97	97	100.00%
TOTAL	454	504	90.00%

c. What are some of the problems faced by offenders who enroll in education programs?

Significant parts of the offender student population do not see the importance of getting an education and many have a history of educational failure. Therefore, they may not participate in classes with much enthusiasm or internal motivation.

4. Substance Abuse Services:

a. What substance abuse treatment or education programs does this institution have?
Gateway Foundation offers substance abuse treatment. Chillicothe Correctional Center offers Short Term (which includes 84 day and 120 day programs), Intermediate (180 day OUT and BDSTP), Long Term (Court and Board Stipulated), Partial Day (which will end when the final few participates compete) and STINT (Short Term Intensive Treatment). They provide a wide variety of educational material based on substance abuse, cognitive restructure and behavior modification.

b. How many beds are allocated to those programs?
256

c. How many offenders do those programs serve each year?
1026

d. What percent of offenders successfully complete those programs?
93%

e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

The women's population brings a separate set of concerns that the male offender population does not. Research indicates the need for gender responsive programming, which requires needs be met that are not addressed in traditional treatment programs. Some additional areas that must be addressed include poor health, risk of sexually transmitted diseases, psychological problems, a history of victimization/trauma, family responsibility, and lack of employment skills. There is the additional concern of the balance of security with the need to provide treatment. Correctional staff is trained primarily to ensure safety and security within our facilities, while treatment staff views incarceration as a time for rehabilitation. Continuous training and redirection is needed to balance these two philosophies. One final challenge in running a treatment program in a prison setting is finding adequately qualified staff in a rural location. This requires frequent advertising to discover potential employees.

5. Vocational Programs:

a. What types of vocational education programs are offered at this institution?
There are currently (5) five career and technical programs offered at CCC. They are: Business Technology, Web Design, Cosmetology, Culinary Arts, Professional Gardening and Landscaping.

b. How many offenders (and %) participate in these programs each year?

Fiscal Year	Enrollment YTD	Completions YTD	Completion %
2014	225	114	51.00%

c. Do the programs lead to the award of a certificate?

Each offender who completes a vocational program receives a Department of Labor Certification which corresponds to the particular area of study. In addition, a certificate of completion from the DOC-Division of Offender Rehabilitative Services is also presented upon program completion. Also, (3) three of the current vocational programs offer Professional Certification or license sure. Cosmetology participants who complete can earn a license to practice Cosmetology in the State of Missouri if they pass a practical and a theorem exam. In Culinary Arts a nationally recognized, ServSafe certificate can be earned through successfully passing an exam. In Business Technology students can earn at least one Microsoft Office and are recognized world wide.

- d. Do you offer any training related to computer skills?
CTE does offer training related to computer skills. The programs which are predominantly computer based are Business Technology and Web Design. However, all CTE programs have elements of computer usage throughout the curriculum.

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution?
Men's boxers, women's briefs, washcloths, towels and sheets.
- b. How many (and %) of offenders work for MVE at this site?
30 offenders (2.5%)
- c. Who are the customers for those products?
DAI is the primary customer; they issue these items to the offenders, and items are available for offenders to purchase through the offender canteen if they wish to have additional items.
- d. What skills are the offenders gaining to help them when released back to the community?
Offenders learn how to sew, work well with others and work as part of a team to accomplish quality products. Some offenders will also learn leadership, clerical and mechanical skills. Additionally, all offenders have the opportunity to learn some basic fork lifting skills and enroll in Public Broadcast System (PBS) classes "Work Place Essential Skills" and "Computer Literacy" and "Mavis Beacon Teaches Typing."

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care?
Yes
- b. How many offenders are seen in chronic care clinics?
955
- c. What are some examples of common medical conditions seen in the medical unit?
Diabetes, Hypertension, Asthma, COPD, Seizures, Hepatitis C, Cardiovascular Disease, Cancer, Arthritis, Chronic Pain, Dental, Glaucoma, HIV, TB, Thyroid.
- d. What are you doing to provide health education to offenders?
Annual Health Fair, written and verbal education provided at sick call and during chronic care clinics, information posted on housing unit bulletin boards and medical waiting room, information broadcast on offender TV channel periodically.
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?
No.
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain

Yes, as aging occurs health naturally declines, especially for those with chronic conditions. Also, many of the population for which we provide healthcare have led unhealthy lifestyles prior to incarceration which can lead to poorer health later in life.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?

Most of the mental health services can be categorized into six main groups. They are Chronic Care, Individual Encounters, Groups, Administrative Segregation, Crisis intervention and Suicide intervention. As Chronic Care and Suicide intervention will be discussed in greater detail later in this document, these two items will be excluded in the response to this current question.

Offenders may request an Individual Encounter with Mental Health by submitting a Health Services Request (HSR). After Mental Health receives an HSR from an offender, a response letter is generated to notify the offender that Mental Health has received their request. The appropriate mental health staff member will then schedule an appointment with the offender to address their concern. Staff referrals are an additional source that generates Individual Encounters. Staff referrals are handled in a manner similar to that of HSR.

Groups are advertised on the offender TV channel. Offenders are able to request participation in mental health groups by sending Mental Health a letter (kite) requesting a group they are interested in taking. The Mental Health department will also accept requests for groups by way of HSR submitted by the offender. The group facilitator will make use of the kites, HSR, and staff referrals in order to fill the offered group.

A Qualified Mental Health Provider (QMHP) will attempt to make weekly contact with all offenders who are housed in the Administrative Segregation Unit. Housing unit 8 D is in place to help offenders who have difficulty adjusting to general population after being released from Administrative Segregation.

The Mental Health department will accept requests from any Department of Corrections staff member for death notifications. After receiving a request for death notification a Qualified Mental Health Provider will meet with the offender as soon as possible. All other crisis's the offender can be placed on TASC pending Mental Health review until Mental Health staff can see the offender.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

There has been (1) one successful suicide at Chillicothe Correctional Center in 2014. Offenders on suicide watch are monitored by custody staff at fifteen-minute intervals, as well as by cameras located in these cells.

A Crisis Treatment Plan is generated by mental health staff that details the goals and objectives that a client must meet to demonstrate improved stability and suitability for release from suicide watch. Mental health staff meet with these offenders on a daily basis to monitor for improved stability. Most offenders are released in under seventy-two hours; however, they may remain on this status for additional time if needed. Only the Institutional Chief of Mental Health Services, Staff Psychologist, or a Qualified

Mental Health Professional who is operating as Acting ICMHS are authorized to remove an offender from suicide watch status.

All DOC staff members are trained to recognize verbal and behavioral cues that indicate potential suicide. This instruction is provided to the staff during initial training with DOC and every other year thereafter. Currently, a Qualified Mental Health Professional and the Institutional Chief of Mental Health Services is providing the biennial training for staff at the Chillicothe Correctional Center.

c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

As of November 1, 2014 there were 443 offenders receiving psychotropic medications which was approximately 33.26% of Chillicothe's offender population at that time.

d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

As of December 15, 2014 there were 433 offenders on camp who are considered to have a moderate level of mental health treatment needs and 10 who are considered to have serious functional impairment due to a Mental Disorder. Of the total 443 offenders, there is (1) who currently have an involuntary medication order in place. All 443 offenders meet with a qualified mental health professional at minimum once every month. Additional therapy sessions are scheduled in response to HSRs submitted by offenders and staff referrals.

Those who are receiving psychotropic medication meet with a psychiatrist at minimum every ninety days. Some psychiatric appointments are provided more frequently depending on the individual needs of the offender. In addition, those who are taking medications meet with a psychiatric nurse on a regular basis to monitor any effects that the medications could have on the offender. Those who receive involuntary medication meet with a psychiatrist every fourteen days.

Offenders who are dealing with chronic or serious mental illness are given priority for participation in mental health groups.

9. What is your greatest challenge in managing this institution?

Continuing to provide an atmosphere for staff which fosters professionalism, motivation and excellence.

10. What is your greatest asset to assist you in managing this institution?

Quality staff.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

Vehicle License	Year	Make	Model	Designation	Mileage	Condition
13-0006M	2009	Ford	Crown Victoria	Perimeter Vehicle	78,451	Fair
13-0520M	2009	Ford	Crown Victoria	Perimeter Vehicle	79,421	Fair
13-0964M	2009	Ford	Crown Victoria	Offender Transportation	104,480	Good
13-0965M	2009	Ford	Crown Victoria	Offender Transportation	90,122	Good
13-0966M	2009	Ford	Crown Victoria	Offender Transportation	81,513	Good
13-0967M	2009	Ford	Crown Victoria	Offender Transportation	73,127	Good
13-0968M	2009	Ford	Crown Victoria	Offender Transportation	82,497	Good

32-0282M	2008	Chevrolet	Uplander Mini Van	Offender Transportation	125,789	Good
32-0285M	2008	Chevrolet	Uplander Mini Van	Offender Transportation	97,457	Good
13-0138M	2009	Ford	Van/15 Passenger	Offender Transportation/CRCC	60,701	Good
13-0969M	2009	Ford	Van/15 Passenger	Offender Transportation	68,699	Good
13-0970M	2009	Ford	Van/15 Passenger	Offender Transportation	80,191	Good
13-0971M	2009	Ford	Van/15 Passenger	Offender Transportation	65,591	Good
13-0972M	2009	Ford	Van/15 Passenger	Offender Transportation	65,318	Good
13-0973M	2009	Ford	Van/15 Passenger	Handicap Offender Transportation	35,303	Good
13-0174M	2009	Ford	Van/12 Passenger	Offender Transportation	45,800	Good
13-0363M	2009	Ford	Van/12 Passenger	Offender Transportation	56,189	Good
13-0419M	2009	Ford	Van/12 Passenger	Offender Transportation	59,254	Good
13-0139M	2009	Chevrolet	Impala	Pool Vehicle/On Loan to CRCC	79,817	Good
13-0297M	2009	Chevrolet	Impala	Pool Vehicle	91,963	Good
13-0974M	2009	Chevrolet	Equinox	Pool Vehicle	62,887	Good
13-0976M	2009	Chevrolet	Impala	Pool Vehicle	80,555	Good
13-0977M	2009	Chevrolet	Impala	Pool Vehicle	82,898	Good
13-0978M	2009	Chevrolet	Impala	Pool Vehicle	82,834	Good
13-0975M	2009	Ford	F-250	Maintenance	14,351	Good
13-0979M	2009	Chevrolet	1 Ton Truck Silverado 4x4	Maintenance	3,240	Good
13-0980M	2010	Ford	F-350/Box Truck	Maintenance/Custody	6,851	Excellent

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

Morale level is medium with Custody Staff. Lack of significant pay raises is a recurring theme amongst Custody Staff but satisfaction with the working environment at CCC seems to be stable.

13. Caseworkers:

A. How many caseworkers are assigned to this institution?

19 Corrections Case Managers and 3 Corrections Classification Assistants

B. Do you currently have any caseworker vacancies?

Yes (2)

C. Do the caseworkers accumulate comp-time?

No

D. Do the caseworkers at this institution work alternative schedules?

Yes

E. How do inmates gain access to meet with caseworkers?

Caseworkers have open door hours from 8:30 a.m. to 4:15 p.m. Monday through Friday.

Caseworker staff are available in units in the afternoon until 4:15 p.m.

F. Average caseload size per caseworker?

Currently, the average caseload is 70 offenders per caseworker.

- # of disciplinary hearings per month?

399 per month

- # of IRR's and grievances per month?

65 IRR's per month and 20 grievances per month

- # of transfers written per month?

18 transfers per month out of the institution

- # of re-classification analysis (RCA's) per month?

110 RCA's per month

G. Are there any services that you believe caseworkers should be providing, but are not providing?

No

H. If so, what are the barriers that prevent caseworkers from delivering these services?

N/A

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

- **Pathway to Change**
- **Anger Management**
- **Impact of Crime on Victims (ICVC)**
- **Catholic Charities**
- **Green Hills Empowerment**
- **Pre-Release Program**
- **Resource Library**

J. What other duties are assigned to caseworkers at this institution?

Caseworkers are often called upon to provide assistance to other areas. They act as visiting Room Liaison, assist with the Puppies for Parole Program, assist with Video Court, conduct DFS and Social Security interviews, assist with legal calls, treatment activities, contact outside agencies to assist with housing and medication issues, and conduct video conferences for re-entry purposes. As this is a female institution, the Case Managers are also required to do Gender Response Assessments.

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution?

Currently there is one District Administrator and seven allotted Institutional Parole Officers; we are currently fully staffed.

B. Do you currently have any staff shortages?

Yes. Due to the increase in our population and a treatment unit that is constantly full, it would be a great benefit to have another supervisor position.

C. Do the parole officers accumulate comp-time?

Only if required to attend training or some type of program away from the institution. This is very rare. In the event comp time is accumulated, we work very diligently to flex the time off the week it is earned.

D. Do the parole officers at this institution flex their time, work alternative schedules?

The only event of flex time is when comp time is earned, as indicated above. At this time, six (6) staff work five, eight-hour days and one (1) staff work four(4), ten-hour days.

E. How do inmates gain access to meet with parole officers?

Offenders gain access to the parole officers by writing kites or attending open door sessions three hours per week, per housing unit (potentially 256 offenders).

F. Average caseload size per parole officer?

For four of the officers, the caseload ranges from 100-150, but for two officers assigned to a housing unit by themselves, their caseload would be the entire housing unit (potentially 256 offenders).

- # of pre-parole hearing reports per month?

65

- # of community placement reports per month?

25

- # of investigation requests per month?

95

G. Are there any services that you believe parole officers should be providing, but are not providing?

No.

H. If so, what are the barriers that prevent officers from delivering these services?

I. What type of inmate programs/classes are the parole officers at this institution involved in?
The parole officers are involved in a monthly pre-release group. Specifics of the requirements of supervision on probation, parole or conditional release are discussed in detail. When allowed, the parole officers also assist in the orientation classes for new general population and treatment offenders to CCC. During these orientations, the offenders are advised on general probation and parole questions, including but not limited to information regarding scheduling of parole hearings, meetings with the institutional parole officers, jail time credit on their sentences, and the role of the Parole Board in the decision making process.

14. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

None

15. Does your institution have saturation housing? If so, how many beds?

No

17. Radio/Battery Needs:

a. What is the number of radios in working condition?

494

b. Do you have an adequate supply of batteries with a good life expectancy?

Yes

c. Are the conditioners/rechargers in good working order?

The rechargers are in good working order. Of the (12) conditioners we had, 9 have been surplused and only one of the remaining (3) is in working order. However, the conditioners are rarely used due to the new style of batteries we have.

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Cremer Therapeutic Community Center			
Custody Level	Low	Warden	Cindy Steuber
Total Acreage	8	Address	689 Highway O
Acreage w/in Perimeter	1		Fulton, MO 65251
Square Footage	Institution 42,256 Laboratory 2,200	Telephone:	573-592-4013
Year Opened	1994	Fax:	573-592-4019
Operational Capacity/Count (as of December 1, 2014)	180/169		
General Population Beds (capacity and count as of December 1, 2014)	N/A	Deputy Warden	N/A
Segregation Beds (capacity and count as of December 1, 2014)	4 / 2	Deputy Warden	N/A
Treatment Beds (capacity and count as of December 1, 2014)	180/169	Asst. Warden	Kim Crouch
Work Cadre Beds (capacity and count as of December 1, 2014)	N/A	Substance Abuse Unit Supervisor	Doug Coon
Diagnostic Beds (capacity and count as of December 1, 2014)	N/A	Chief of Custody	Captain Dave Topash
Protective Custody Beds (capacity and count as of December 1, 2014)	N/A		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? [Fair to Poor](#).
- b. What capital improvement projects do you foresee at this facility over the next six years?
[Bathrooms and showers need plumbing and walls updated. Interior walls continue to crumble as the bricks need sealant. Updates thru OA so that we can function independently from the state hospital for electric, phone, computers, heating, and water. The elevators are original and need to be replaced. Parts for repairs have not been made for many years and we have been fortunate that old closed elevators in the mental health units were stripped for parts we have needed.](#)
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
[In order to keep the facility safe, sanitary and physically sound, these upgrades are very important. If the elevator becomes un-useable, we could not comply with ADA standards for offenders or staff.](#)

2. Staffing:

- a. Do you have any critical staff shortages? **Not at this time.**
- b. What is your average vacancy rate for all staff and for custody staff only? **All staff-1%
Custody - 2%**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? **When we are fully staffed, there are no issues.**
- d. What is the process for assigning overtime to staff? **The shift supervisor selects volunteers from the "volunteer list" which officers sign to work overtime. If there are no volunteers on the list, the shift supervisor asks each officer, in order of seniority, if they wish to work the overtime. If still no volunteers are found, then the mandatory list is utilized. The list contains all officers on the shift. The officer listed on the top of the list, if on duty, is required to stay and work the overtime. If the person on the top of the list is not on duty, then the second person is utilized, and so on. Once an officer has worked the overtime (minimum of 1 hour), they are moved to the bottom of the list and everyone else is moved up.**
Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 56% of comp time accrued is paid off; 44% is used.**
- e. Is staff able to utilize accrued comp-time when they choose? **Yes, as long as scheduling allows.**

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? **78 enrolled (43%)**
- b. How many (and %) of inmate students earn their HSE each year in this institution? **In FY14, 86 offenders at CTCC took the HSE test and 75 passed (87%)**
- c. What are some of the problems faced by offenders who enroll in education programs? **Mainly, a need for more one on one attention than what can be provided. Some have special educational needs; however, every attempt is made by staff to accommodate those needs.**

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have? **We serve as a short term treatment program, 3 months in length. Short term (559.115, 559.036, 217.785, parole referred).**
- b. How many beds are allocated to those programs? **180**
- c. How many offenders do those programs serve each year? **FY 2014=775**
- d. What percent of offenders successfully complete those programs? **FY14-83%**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? **Limited community resources to set up continuing care following release.
Difficulty providing adequate training to treatment staff relative to their profession.**

5. Vocational Programs: **N/A**

- a. What types of vocational education programs are offered at this institution?
- b. How many offenders (and %) participate in these programs each year?
- c. Do the programs lead to the award of a certificate?
- d. Do you offer any training related to computer skills?

6. Missouri Vocational Enterprises: **N/A**

- a. What products are manufactured at this institution?
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?

d. What skills are the offenders gaining to help them when released back to the community?

7. Medical Health Services:

a. Is the facility accredited by the National Commission on Correctional Health Care? Yes, CTCC was accredited in 2005, reaccredited in 2008 and 2011. We are due for reaccreditation early in 2015.

b. How many offenders are seen in chronic care clinics? 286 offenders were seen by a physician and 24 were seen by a nurse for chronic care visits in 2014. Many are seen in addition to their scheduled chronic care visit for follow-up appointments specific to their need.

c. What are some examples of common medical conditions seen in the medical unit?
Hypertension, rashes, chronic pain, back pain/problems, headaches, allergy related problems, constipation and athlete's feet or jock itch, tooth pain and boils.

d. What are you doing to provide health education to offenders? Orientation and access to care is provided upon arrival to CTCC. During each offenders first full week at CTCC, they attend a health fair for one hour where informational handouts are offered and the following topics are discussed: Access to medical care at CTCC, sexually transmitted diseases, HIV and AIDS, hazards of smoking, facts and benefits of smoking cessation, athletes foot, dental care and hygiene, TB and MRSA. Opportunity for questions and discussion is given and offenders are encouraged to come to medical for personal questions and concerns. Education continues to be provided at clinical encounters. Offenders receive verbal instruction during nurse and physician sick call; handouts are readily available with specific education through nurse sick call. In addition, education specific to chronic diseases is given through chronic care clinics. Pre and Post test counseling is also given to offenders receiving HIV (exit, mandatory or voluntary) lab tests.

e. Have you had any cases of active Tuberculosis in this facility in the past year? No. If so, how did you respond? N/A

f. Is the aging of the population effecting health care in prisons as it is effecting health care everywhere else? Yes, we are seeing an older population of offenders. It is making an impact on our healthcare system by requiring more nursing and doctor visits, more involved and intensive care and more medication. It also affects our out counts to specialists. We are finding our population in general has more health concerns.

8. Mental Health Services:

a. How do offenders go about obtaining mental health treatment services? Offenders are seen via staff referrals in times of perceived crisis. Offenders are seen via Health Services Request form for self advocacy.

b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? None

c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? None (0%)

d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? Chronically and/or seriously mentally ill offenders do not fit the criteria for assignment to CTCC.

9. What is your greatest challenge in managing this institution? Ensuring that substance abuse staff are able to receive specialized training in substance abuse counseling.

10. What is your greatest asset to assist you in managing this institution? Having an administrative team of staff who are dedicated to the mission of our facility.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

We have:

1994 Dodge 15 passenger van with 93,595 miles.
2003 Ford 15 passenger van with 160,344 miles.
2000 Chevy Impala car with 115,912 miles (our only pool vehicle)
2001 Ford Crown Vic with 139,456 miles.
2002 Ford Crown Vic with 122,933 miles.

The 1994 Dodge Van has a lot of rust patches on it. All vehicles have hail damage.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (**Please have the Major answer**) **Above** average. Time off is fairly easy to come by and overtime is low.

13. Caseworkers:

- A. How many caseworkers are assigned to this institution? **1**
- B. Do you currently have any caseworker vacancies? **No**
- C. Do the caseworkers accumulate comp-time? **Very rarely, if ever. The workload of the position itself normally does not require the person to work outside of core work hours.**
- D. Do the caseworkers at this institution work alternative schedules? **No**
- E. How do inmates gain access to meet with caseworkers? **Utilizing the “open door” schedule, or by writing a note with their request.**
- F. Average caseload size per caseworker? **180**
 - # of disciplinary hearings per month? **56** (average per month for the last 12 months)
 - # of IRR's and grievances per month? **for FY14 average 1 IRR per month and there were zero grievances for that time frame.**
 - # of transfers written per month? **0** (transfers at this facility are not handled by the CCM)
 - # of re-classification analysis (RCA's) per month? **0** (Offenders in an ITC do not receive ICA/RCA's)
- G. Are there any services that you believe caseworkers should be providing, but are not providing? **No**
- H. If so, what are the barriers that prevent caseworkers from delivering these services? **N/A**
- I. What type of inmate programs/classes are the caseworkers at this institution involved in? **Impact of Crime on Victims classes (the full curriculum is not utilized, but individual lessons are presented by the CCM and/or IAC).**
- J. What other duties are assigned to caseworkers at this institution? **A huge workload increase took place in August 2013 when the PREA Risk Assessment (which was since renamed the Adult Internal Risk Assessment) was added by policy, to be completed within 72 hours of an offenders arrival and then again within 30 days of arrival. When offenders are only at CTCC for 12 weeks average, this makes for quick offender turnover resulting in a lot of assessments to be completed (have ranged from 38 to 83 in a month depending on intake). This position is also responsible for guilty plea/legal forms, offender indigence issues, account balance transfers, unofficial letters of incarceration, notary, visiting liaison (which results in a lot of phone calls from offender family members), intake processing, disciplinary hearings and offender grievances. Due to this facility housing short term ITC offenders, TAP's and RCA's are not required. Instead the offenders receive TAP treatment plans which are completed by the substance abuse counselors.**

14. Institutional Probation and Parole officers:

- A. How many parole officers are assigned to this institution? **3**
- B. Do you currently have any staff shortages? **No**
- C. Do the parole officers accumulate comp-time? **Yes**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **Yes/Yes**
- E. How do inmates gain access to meet with parole officers? **The parole officer calls the offender out for an interview at the time their court report is being completed. If an offender has a question, they can write a note requesting to be seen. The parole officers provide 1 hour during orientation when offenders can ask questions, and are on the wings one hour a week providing a re-entry class during which questions may be addressed by their officer.**
- F. Average caseload size per parole officer? **60**
 - # of pre-parole hearing reports per month? **None; however, based on the offender population CTCC utilizes court reports and there was an average of 56 court reports completed per month.**
 - # of community placement reports per month? **N/A**
 - # of investigation requests per month? **11 per month**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **No. The officers provide re-entry classes and orientation classes on a weekly basis. In order to ensure proper caseload maintenance, including court contacts, Parole Board and offender family contacts, their time is limited.**
- H. If so, what are the barriers that prevent officers from delivering these services? **N/A**
- I. What type of inmate programs/classes are the parole officers at this institution involved in? **One hour during new offender orientation per week, and one hour of re-entry class per week, which provides an in depth explanation of each probation/parole stipulation.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **Nothing at this time.**

16. Does your institution have saturation housing? If so, how many beds? **No**

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? **45**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes**
- c. Are the conditioners/rechargers in good working order? **Yes**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Crossroads Correctional Center				
Custody Level	C-2 (Medium) - C-5 (Maximum)		Warden	Ronda J. Pash
Total Acreage	48 acres		Address	1115 E. Pence Rd.
Acreage w/in Perimeter	40 acres			Cameron, MO. 64429
Square Footage	580,800 sq. ft.		Telephone:	(816) 632-2727
Year Opened	1997		Fax:	(816) 632-2754
Operational Capacity/Count (as of December 20, 2013)	Capacity- 1470 Count- 1467			
General Population Beds (capacity and count as of December 20, 2013)	Capacity- 1125 Count- 1134		Deputy Warden	Chris McBee
Segregation Beds (capacity and count as of December 20, 2013)	Capacity- 273 Count-257		Deputy Warden	Terry Page
Treatment Beds (capacity and count as of December 20, 2013)	N/A		Asst. Warden	Todd Warren
Work Cadre Beds (capacity and count as of December 20, 2013)	N/A		Asst. Warden	Todd Warden
Diagnostic Beds (capacity and count as of December 20, 2013)	N/A		Major	Lauretta Aitkens
Protective Custody Beds (capacity and count as of December 20, 2013)	Capacity- 72 Count-65			

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

RESPONSE: The overall condition of the institution is still very good. There are some areas of concern needing replacement/repair/upgrade.

b. What capital improvement projects do you foresee at this facility over the next six years?

RESPONSE: The following capital improvement projects are needed at CRCC:

- **Lagoon needs dredged and cover replacement**
- **Repair and upgrade is needed to current security camera system to include fence cameras**
- **Parking lot needs to be re-asphalting to include perimeter roads**
- **Fire Alarm System/Security Electronic System upgrade due to obsolete parts and support**
- **Boiler Replacement**
- **Replacement of both Gates, Fencing Tracks, and Controls at the Back Gate**
- **Upgrade Existing Lethal Electrified Fence System parts and support**

- **Replacement of Walk-In Freezers and Compressors in Food Service, and Food Service Warehouse**
- **Upgrade the current BAS system.**

c. How critical do you believe those projects are to the long-term sustainability of this facility?

RESPONSE: We believe these projects to be crucial to the security of the institution to provide a safe, healthy and secure environment.

2. Staffing:

a. Do you have any critical staff shortages?

RESPONSE: Not at present.

b. What is your average vacancy rate for all staff and for custody staff only?

RESPONSE: Our vacancy/turnover rate is 20% for custody staff and 10.52% for non-custody staff. The average for all staff is 17.33%.

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

RESPONSE: No, first and foremost, we ensure safety and security needs of the institution are met to ensure the maximum results in regards to public safety. We are always aware and attentive to staff scheduling and/or requests to utilize comp time in an effort to ensure comp time balances are maintained at minimum levels.

d. What is the process for assigning overtime to staff?

RESPONSE: In accordance with Departmental Policy and Standard Operating Procedures for D2-8.11 Work Schedules, a compensatory time notification system has been developed, utilizing a mandatory and voluntary overtime list. When there is a need to request staff to work additional hours to provide shift coverage, a request for volunteers is made first. If volunteers are not available, the mandatory list will be utilized to provide shift coverage in the order of seniority (beginning with the most recent hire).

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

RESPONSE: Approximately 66% of comp time accrued is paid off; 34% is used.

f. Is staff able to utilize accrued comp-time when they choose?

RESPONSE: We make every attempt to give staff time off when requested dependent upon our current vacancies; however, at times this is not possible, i.e. major holidays, deer season, etc.

3. Education Services:

a. How many (and %) of inmate students at this institution are currently enrolled in school?

RESPONSE: Crossroads Correctional Center has a volunteer-facilitated Academic Education Class, with 5 offenders (0.34%) currently enrolled.

b. How many (and %) of inmate students earn their HSE each year in this institution?

RESPONSE: In 2014, a total of 15 offenders (1.026%) earned their High School Equivalency after taking the HiSET tests.

c. What are some of the problems faced by offenders who enroll in education programs?

RESPONSE: Volunteers facilitating this program report it is a challenge dealing with the number of offenders presented with learning disabilities. Maintaining adequate volunteers with regular attendance to facilitate the class also presents a challenge.

4. Substance Abuse Services:

a. What substance abuse treatment or education programs does this institution have?

RESPONSE: This institution has volunteered facilitated AA meetings once a week. How many beds are allocated to those programs?

RESPONSE: Not applicable.

b. How many offenders do those programs serve each year?

RESPONSE: 545 offenders participated in AA during 2014

What percent of offenders successfully complete those programs?

RESPONSE: Not applicable; this program is ongoing.

What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

RESPONSE: Not applicable.

5. Vocational Programs:

a. What types of vocational education programs are offered at this institution?

RESPONSE: Crossroads Correctional Center does not offer any type of vocational programs to the offender population.

b. How many offenders (and %) participate in these programs each year?

RESPONSE: Not applicable.

c. Do the programs lead to the award of a certificate?

RESPONSE: Not applicable.

d. Do you offer any training related to computer skills?

RESPONSE: Not applicable.

6. Missouri Vocational Enterprises:

a. What products are manufactured at this institution?

RESPONSE: The products manufactured at the MVE/CRCC Consumable Products Factory are toilet tissue (both 1 and 2-ply), plastic trash bags of assorted sizes in clear and black, pleated and fiberglass HVAC filters in standard sizes and special sizes upon request.

b. How many (and %) of offenders work for MVE at this site?

RESPONSE: CRCC MVE presently employs 48 offenders, which is 3.06% of the offender population.

c. Who are the customers for those products?

RESPONSE: Customers consist of the Missouri Department of Corrections and all other Missouri state agencies. We also sell our products to schools, churches and other not-for-profit organizations in Missouri, as well as any State of Missouri employee. Besides these Missouri customers, we also sell toilet tissue to PEN Products, MVE's counterpart in Indiana, for adding value to their prison industries program and resale to their state customers in Indiana. We also sell to Iowa Prison Industries for resale and distribution to Iowa Department of Corrections.

d. What skills are the offenders gaining to help them when released back to the community?

RESPONSE: The mission statement of Missouri Vocational Enterprises is “to provide employment for offenders that will encourage them to develop favorable attitudes and useful skills. Enhance public safety by maximizing education and job training of offenders for success, while incarcerated and upon release.” But more simply stated, MVE/CRCC Consumable Products Factory instills the responsibility to have offenders report to work, on time, on a daily basis. For some, this may be the first time in their lives when they have had to take on this responsibility. For others who have worked previously outside a prison setting, it reinforces this ethic. We teach or reinforce the skills to produce quality products at competitive costs which our end customers can be satisfied using. Staff try to lead by example and always attempt to demonstrate to offenders the standards for living which will make them more prepared to reenter society.

7. Medical Health Services:

a. Is the facility accredited by the National Commission on Correctional Health Care?

RESPONSE: Yes.

b. How many offenders are seen in chronic care clinics?

RESPONSE: There are currently 1041 offenders enrolled in chronic care.

c. What are some examples of common medical conditions seen in the medical unit?

RESPONSE: Conditions such as, back pain and chronic medical conditions such as hypertension, asthma, diabetes, common colds, allergies, headaches, rashes, recreation-related injuries, requests for medication renewals

d. What are you doing to provide health education to offenders?

RESPONSE: Annual health fair, sick call education handouts, flyers posted in medical waiting area, education during chronic care visits, newly-implemented focused training/education for those patients found to be noncompliant with chronic illness treatments.

e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?

RESPONSE: No.

f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.

RESPONSE: Yes, it is affecting health care in prisons. We are seeing more permanent patients in the infirmary, as well as more admissions to the infirmary. In general, more patients are requiring the use of wheelchairs, more medications being ordered and more medications needing to be “watch-take” status as the elderly are unable to maintain control of multiple medications and the dosages for such. There is an increased need for Enhanced Care Units for elderly offenders who may not need hospital/infirmiry admission, but need assistance with activities of daily living.

8. Mental Health Services:

a. How do offenders go about obtaining mental health treatment services?

RESPONSE: Offenders may request an individual encounter with a qualified mental health professional by submitting a medical services request. Once a request is received, the offender is sent a reply that the request was received and scheduled for an appointment to address their concerns. Staff referrals also generate individual encounters and are handled in a similar fashion. Additionally, offenders transferred into the institution are seen and evaluated by a qualified mental health professional according to their determined mental health level and needs.

b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

RESPONSE: There was 1 successful suicide at CRCC in the last year. When an offender feels suicidal or makes a statement of harming himself, he is placed on suicide watch and is assessed daily by a qualified mental health professional. Additionally, all DOC staff members are trained in suicide prevention to recognize verbal and behavioral cues that indicate potential suicide. This training is provided to staff during initial training and annually thereafter.

c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

RESPONSE: There are 153 offenders receiving psychotropic medications, which is 10.91% of the offender population.

d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

RESPONSE: There are currently 181 offenders who are considered to have a moderate level of mental health needs and 14 offenders who are considered to have serious functional impairment due to a mental disorder. 153 offenders are on psychotropic medication, with 7 offenders currently having an involuntary medication order in place. Those offenders under an order of involuntary medication are seen every two weeks. All of these offenders meet with a qualified mental health professional at a minimum of once every month. Additional therapy sessions are scheduled in response to medical services requests submitted by offenders and staff referrals.

9. What is your greatest challenge in managing this institution?

RESPONSE: Managing available resources – Over recent years, the Department has experienced multiple reductions in both staffing and funding. These issues, in conjunction with the Department's historic high employee turnover rates and growing workloads, make it evermore difficult to fulfill the institution's mission.

10. What is your greatest asset to assist you in managing this institution?

RESPONSE: The staff at the institution and support structure provided by Central Office.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

RESPONSE: Fair condition; we have the following vehicles in our fleet:

2007 Crown Vic	178556 miles
2007 Crown Vic	67260 miles
2006 Dodge Van	184185 miles
2007 Crown Vic	114264 miles
2005 Ford Van	77412 miles
2007 Crown Vic	124812 miles
2007 Crown Vic	107297 miles
2002 Crown Vic	124589 miles
2007 Crown Vic	132035 miles
2008 Chevy Uplander	124589 miles
2008 Crown Vic	134026 miles
2014 Dodge Caravan	14299 miles

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (Please have the Major answer)

RESPONSE: Over the past several years, staff have been requested and expected to do more with less during these tough economic times. Through the continued effort put forth by the administrative team and supervisory staff, I would consider custody staff morale at the medium-high level.

13. Caseworkers:

A. How many caseworkers are assigned to this institution?

RESPONSE: CRCC has 16 case manager positions and 2 corrections classification assistants.

B. Do you currently have any caseworker vacancies?

RESPONSE: We currently have 1 case manager vacancy.

C. Do the caseworkers accumulate comp-time?

RESPONSE: No.

D. Do the caseworkers at this institution work alternative schedules?

RESPONSE: As required.

E. How do inmates gain access to meet with caseworkers?

RESPONSE: By completion of an offender request form from staff.

F. Average caseload size per caseworker?

RESPONSE: 144 offenders.

- # of disciplinary hearings per month?

RESPONSE: 312 disciplinary hearings per month.

- # of IRR's and grievances per month?

RESPONSE: Approximately 150 IRR's/74 grievances per month.

- # of transfers written per month?

RESPONSE: 23 transfers per month.

- # of re-classification analysis (RCA's) per month?

RESPONSE: Approximately 140 RCA's per month.

G. Are there any services that you believe caseworkers should be providing, but are not providing?

RESPONSE: No.

H. If so, what are the barriers that prevent caseworkers from delivering these services?

RESPONSE: Not applicable.

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

RESPONSE: Impact of Crime on Victims, Restorative Justice, Pathways to Change, Inside/Out Dads, Anger Management, New Leash on Life Dog Program.

J. What other duties are assigned to caseworkers at this institution?

RESPONSE: Family contact, process and track food visit applications, visiting applications, return family phone calls, complete PREA risk assessments, conduct protective custody hearings, conduct classification hearings, determine enemy situations, crisis counseling, monitor laundry, monitor cleanliness, processing of new offenders, visiting room liaison, general liaison, involvement in litigation, involvement in clothing and property, complete institutional transitional accountability plan, restorative justice projects, process and review Honor Dorm applications, interviewing using motivation interviewing techniques, conduct meetings, facilitate offender room moves, etc.

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution?

RESPONSE: 2.5

B. Do you currently have any staff shortages?

RESPONSE: Yes; we are currently sharing a full-time clerical with Western Missouri Correctional Center and currently working on getting the second PO position filled.

C. Do the parole officers accumulate comp-time?

RESPONSE: No.

D. Do the parole officers at this institution flex their time, work alternative schedules?

RESPONSE: As required.

E. How do inmates gain access to meet with parole officers?

RESPONSE: Offenders can request an appointment with the institutional parole officer in writing.

F. Average caseload size per parole officer?

RESPONSE: There are 1470 offenders at CRCC. If any of the offenders have questions, whether they have not yet had a parole hearing, or are scheduled for Maximum, Conditional or Parole Release, they submit written correspondence to the institutional parole officer, who then responds to them. Due to the fact that we at this time, we actually have 1 1/2 parole officer positions filled, I would say the actual caseload for a full time PO position is easily 100 offenders, whether it is to interview them for a Pre-Hearing Report, obtain a home plan, sign release paperwork, answer written correspondence, or counsel them.

- # of pre-parole hearing reports per month?

RESPONSE: 25

- # of community placement reports per month?

RESPONSE: 5

- # of investigation requests per month?

RESPONSE: 25

G. Are there any services that you believe parole officers should be providing, but are not providing?

RESPONSE: No.

H. If so, what are the barriers that prevent officers from delivering these services?

RESPONSE: Not applicable.

I. What type of inmate programs/classes are the parole officers at this institution involved in?

RESPONSE: Programs are generally handled by classification staff.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

RESPONSE: The Warden has no other issues to discuss or bring to the attention of members of the Joint Committee on Corrections.

16. Does your institution have saturation housing? If so, how many beds?

RESPONSE: No.

17. **Radio/Battery Needs:**

- What is the number of radios in working condition?

RESPONSE: 227

- Do you have an adequate supply of batteries with a good life expectancy?

RESPONSE: Yes.

- Are the conditioners/rechargers in good working order?

RESPONSE: Yes.

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Eastern Reception Diagnostic and Correctional Center			
Custody Level	5	Warden	Terry Russell
Total Acreage	213	Address	2727 Highway K
Acreage w/in Perimeter	76		Bonne Terre, MO 63628
Square Footage	693,413	Telephone:	(573) 358-5516
Year Opened	2003	Fax:	(573) 358-0734
Operational Capacity/Count (as of December 1, 2014)	Capacity-2717 Count-2842		
General Population Beds (capacity and count as of December 1, 2014)	Capacity-1618 Count-1678	Deputy Warden	Joe Hoffmeister, DWO
Segregation Beds (GP) (capacity and count as of December 1, 2014)	Capacity-364 Count-221	Deputy Warden	Jason Lewis, DWOM
Treatment Beds (capacity and count as of December 1, 2014)	None	Asst. Warden	Stan Jackson, GP
Work Cadre Beds (capacity and count as of December 1, 2014)	Capacity-92 Count-93	Asst. Warden	Stanley Payne, R & D
Diagnostic Beds (capacity and count as of December 1, 2014)	Capacity-1007 Count-1149	Major	David Vandergriff
Segregation Beds (Diagn.) (capacity and count as of December 1, 2014)	Capacity-164 Count-79		
Protective Custody Beds (capacity and count as of December 1, 2014)	Capacity-72 Count-72		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution?
Fair to good.
- b. What capital improvement projects do you foresee at this facility over the next six years?
Del-Norte security fence, maintenance on the power plant electrical system, replace the building automation system (BAS and painting the water tower.
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
Del-Norte security fence: This system is in need of replacement within the near future.

Maintenance on the power plant electrical system: This is the most critical of all the projects for the following reason-if this system was to fail, the facility would be without electricity and water for extended periods of time.

BAS replacement: The loss of this system would mean no control of the heat exchangers, outside lighting and all HVAC function of the facility. The computer that

runs the system is Windows 2000 and Johnson Controls will no longer support the M5 system.

Painting the water tower: This project is becoming more critical every year.

2. Staffing:

- a. Do you have any critical staff shortages? **No**
- b. What is your average vacancy rate for all staff and for custody staff only?
All Staff average vacancy rate is 7.9, custody average per month 6.0 and non-custody average per month is 1.9.
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?
The accrual and usage of comp-time is difficult to manage as an effective balance is tricky to achieve. Administrative directive to manage overtime causes a shift/institution to staff at the minimum levels. When the number of staff on site is increased to achieve goals outlined by administration, comp-time is also increased by default.
- d. What is the process for assigning overtime to staff?
The assignment of overtime to staff is done on a voluntary and mandatory basis which is governed by Procedures/Post Orders. One determines the need for a staff member to accrue overtime based on the minimum staffing needs of the shift/institution. If the shift is below minimum staffing, staff would need to volunteer to fill vacancies until the minimum staffing is met/achieved. If there are no volunteers, staff is mandated to stay and accrue comp-time based upon the mandatory overtime list until the minimum staffing is met/achieved.
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 76% of comp time accrued is paid off; 24% is used**
- f. Is staff able to utilize accrued comp-time when they choose?
Unfortunately, for custody NOT usually due to staffing. Non-custody does seem to be able to utilize their comp time.

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?
There are 320 offenders enrolled, out of 616, 52%.
- b. How many (and %) of inmate students earn their HSE each year in this institution?
Last year, 65 offenders earned their HSE, 11%.
- c. What are some of the problems faced by offenders who enroll in education programs?
Offenders enrolled in education may face difficulty due to learning disabilities, mental health issues, medical issues and behavior problems. Additionally, many offenders lack self-confidence because of educational failures prior to incarceration.

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?
ERDCC does not provide substance abuse treatment, but we do have a substance abuse education program called Living in Balance. It is a 12 week evidence-based curriculum developed by Hazelden, which is facilitated by classification staff.
- b. How many beds are allocated to those programs?
The education class is not bed-based so no beds are allocated.
- c. How many offenders do those programs serve each year?
Approximately 75 offenders
- d. What percent of offenders successfully complete those programs?

Approximately 71%. Those discharged were due to segregation assignment for protective custody concerns, rule violations, or were due to transfer as a result of custody level reductions.

- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

The challenge we have encountered with providing Living in Balance are the offenders missing class due to violations, protective custody and transfers due to reclassification.

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution?
ERDCC does not offer any vocational education programs.
- b. How many offenders (and %) participate in these programs each year? N/A
- c. Do the programs lead to the award of a certificate? N/A
- d. Do you offer any training related to computer skills? N/A

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution?
A complete line of janitorial, laundry, kitchen and personal care products are manufactured at ERDCC. Corrugated cartons are also produced.
- b. How many (and %) of offenders work for MVE at this site?
Twenty seven (27) offenders are employed. This is 2% of the workers available at ERDCC.
- c. Who are the customers for those products?
State agencies, city and county governments, political subdivisions, state employees, not-for-profit organizations and other tax supported entities.
- d. What skills are the offenders gaining to help them when released back to the community?
U.S. Department of Labor's Apprenticeship Program; we have currently 19 workers enrolled. Work place essential skills, computer skills, including manufacturing procedures, production techniques, quality control, inventory control, cost control, work place safety and shipping and receiving skills.

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care?
Yes
- b. How many offenders are seen in chronic care clinics?
ERDCC averaged 1881 chronic care clinic enrollments. Chronic care clinics are seen by a practitioner twice annually. The largest individual chronic care clinic enrollments are cardiovascular (#1), hepatitis C (#2) and pain (#3).
- c. What are some examples of common medical conditions seen in the medical unit?
Cardiovascular disease, hypertension, asthma, diabetes, seizure disorder, fractures, cancer, chronic pain, wounds, rashes and skin disorders, HIV, hepatitis C, COPD and respiratory disorders and general decline and inability to care for self due to aging.
- d. What are you doing to provide health education to offenders?
An Offender Health Fair is held annually. The ERDCC 2014 Offender Health was held on 12/3/14 with 484 offenders attending.
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?
No cases of active Tuberculosis in 2014.
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain

Absolutely, yes. The increase age of the population and longer life expectancy in the community has a parallel effect on the prison population. Additionally, incarcerated people have access to medications and medical care they may not have had access to in the community. This causes a marked increase in the use of current resources. An increased aged population equals an increase demand for medication, medical appointments, specialist encounters, procedures and infirmary use. Throughout 2014 ERDCC has sustained a higher permanent patient population in the infirmary than any other year in ERDCC's existence. This is predominantly due to the increased geriatric prison population and their inability to care for themselves in the general population section of the facility.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?
Offenders are able to request mental health services through the HSR (Health Service Request) process. The HSR is submitted and upon being received in the department, he is to be seen within 5 business days. If it is an emergent concern, the offender often alerts a staff member who will then alert a mental health member and the offender can be seen for a crisis intervention.
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?
There were no completed suicides at ERDCC in the past year. Upon arrival at intake, offenders are provided an informational packet on ways to prevent suicide and what to do if they are experiencing suicidal thoughts. Additionally, at least on a monthly basis, the psychologists provide Suicide Prevention Training to DOC staff members going through re-certification.
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?
Approximately 400 offenders (15% of the population) at ERDCC are on psychotropic medications.
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?
There are approximately 500 offenders on mental health chronic care caseload. They are seen by their assigned counselor on a monthly basis, or more, depending on the severity of their mental illness. These offenders are also seen by the psychiatrist for medication management no more than every 90 days (some are seen every 2 weeks, some monthly, etc., depending on the psychiatrist's need to see them). Currently there are 33 MH4 (seriously mentally ill) offenders here; they are seen by their counselor and the psychiatrist at least monthly. If an offender is deemed to have difficulties functioning in general population, he will be referred, based upon certain criteria, to special programming (SRU, SNU, SSRU).

9. What is your greatest challenge in managing this institution?

The mere size and complexity of this institution is a challenge. With more than 2700 offenders and nearly 900 staff, it is a small city with the complexity of a Reception and Diagnostic Center, a level 2/5 (medium/maximum) general population unit and a minimum security unit within the security perimeter. These dynamics offer unique challenges and opportunities for management. The challenge is enhanced with issues such as managing an institution call outs, FMLA and Leave Without Pay for the staff. In addition, the current economic climate of the nation and revenues of the State of Missouri present unique

challenges in managing an institution of this size and operating within the boundaries of current budgetary constraints.

10. What is your greatest asset to assist you in managing this institution?

The institution is very fortunate to have an excellent Administrative Team and a host of hard working, dedicated employees committed to the Department's Mission.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

VEHICLE IDENTIFICATION NUMBERS						
LICENSE#	MAKE	CLASS	MILES	YEAR	CONDITION	DOC I.D. #
13-0014	FORD	FULL SIZE SEDAN	107300	2010	good	247632
13-0122	FORD	FULL SIZE SEDAN	175700	2007	Fair / Good	245852
13-0193	chevy	FULL SIZE SEDAN	143750	2007	good	244221
13-0248	FORD	FULL SIZE SEDAN	115900	2010	good	247633
13-0328	FORD	15 PASSENGER VAN	102320	2008	good/caged van	244462
13-0332	FORD	FULL SIZE SEDAN	90420	2007	Fair / Good	245846
13-0360	BLUEBIRD	PASSENGER BUS	7500	2015	new	247850
13-0508	FORD	FULL SIZE SEDAN	160500	2007	Fair/used for vp	245851
13-0713	JEEP	CHEROKEE	66100	1998	Fair / used for winter vp	206659
13-0824	FREIGHTLINER	2 TON FLAT BED	22220	2000	good	237275
13-0826	FORD	DUMP TRUCK	8650	2000	good	237334
13-0827	FORD	DUMP TRUCK	14300	2000	good	237333
13-0829	BLUEBIRD	PASSENGER BUS	280900	2001	Fair/rough high mileage	238220
13-0860	FORD	FULL SIZE SEDAN	166500	2007	Fair / Good	243438
13-0862	DODGE	1/2 TON 2WD PICKUP	34800	2002	good	239619
13-0866	FORD	15 PASSENGER VAN	17200	2014	new	247647
13-0873	FORD	15 PASSENGER VAN	13200	2014	new	247640
13-0874	FORD	15 PASSENGER VAN	41600	2012	Good/ handicap van	247534
13-0877	CHEVROLET	FULL SIZE SEDAN	56700	2008	good	247599
32-0226	CHEVROLET	FULL SIZE SEDAN	166000	2008	good/used for vp	135120
32-0264	CHEVROLET	UPLANDER VAN	117500	2008	Fair / Good	135150
32-0267	CHEVROLET	UPLANDER VAN	2025600	2008	Fair/rough high mileage	135140
32-0280	CHEVROLET	UPLANDER VAN	241300	2008	Fair/rough high mileage	135141
32-0284	CHEVROLET	UPLANDER VAN	116700	2008	Fair / Good	135137
32-0287	CHEVROLET	UPLANDER VAN	102800	2008	Fair / runs rough	135091
13-0890	FORD	F150 1/2 TON PICKUP	38300	2003	good	239933
13-0891	FORD	F150 1/2 TON PICKUP	42100	2003	good	239934
13-0892	FORD	F150 1/2 TON PICKUP	21900	2003	good	239935
13-0893	CHEVROLET	2500 HD 3/4 TON 4WD P/U	47600	2003	good	239977
13-0899	FORD	BOX BED	80000	2003	good	239987
13-0900	BLUEBIRD	PASSENGER BUS	5600	2015	new	247849
13-0901	FORD	EXPLORER	80500	2003	Fair / Wrecked one side	240598

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

Medium, the greatest majority of our staff states they enjoy their job assignment as well as the career itself. The greatest majority of complaints related to lack of pay increase and the rise of benefit expenses.

13. Case Managers:

A. How many case managers are assigned to this institution?

General Population: 14 CCM IIs & 1 CCA

C & A: 2 CCM IIIIs & 6 CCM IIs

R & D: 6 CCM IIs

Grievance: 1 CCM II

Total: 2 CCM IIIIs, 26 CCM IIs & 1 CCA

B. Do you currently have any case managers vacancies?

Yes, one CCM II

C. Do the case managers accumulate comp-time?

Typically due to budget constraints, comp time is not approved. However, staff may flex the time off later in the week if necessary.

D. Do the case managers at this institution work alternative schedules?

All work five 8-hour shifts, but start/end times range between 7:00 am-4:30pm, Mon-Fri.

E. How do inmates gain access to meet with case managers?

Open office hours are held daily. The adseg case managers do rounds every day.

F. Average caseload size per case manager?

- # of disciplinary hearings per month? **GP: 345 R&D: 238**
- # of IRR's and grievances per month? **IRRs GP: 132, IRRs R&D: 36**
- # of transfers written per month? **GP: 42 R&D: n/a**
- # of re-classification analysis (RCA's) per month? **GP: 133**

G. Are there any services that you believe case managers should be providing, but are not providing?

None at this time.

H. If so, what are the barriers that prevent case managers from delivering these services? **N/A**

I. What type of inmate programs/classes are the case managers at this institution involved in?

Inside Out Dads, Impact of Crime on Victims, Pathway to Change, Anger Management, Employability Skills/Life Skill, Living in Balance, Puppies for Parole.

J. What other duties are assigned to case managers at this institution?

Assisting with the yearly internal security audits, update offender management plans (TAPS), review offender program plans following administrative segregation releases, serve on segregation hearing committees, assist with clothing/laundry, legal mail issues, receive/process visiting and food visit request forms, receive and review incentive housing application request, direct and monitor the Puppies for Parole program activities, receive and validate Qualified Legal Claim forms, assist offenders with telephone and Canteen kiosk issues, receive requests for information from family members and supervisory staff, answer offender correspondence, make pertinent electronic chronological log entries, assist custody staff with escorts/searches/security checks, and arrange/monitor special phone call request.

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution?

12

B. Do you currently have any staff shortages?

Yes, we have one opening.

C. Do the parole officers accumulate comp-time?

Parole Officers at ERDCC can accumulate comp time with prior approval from a supervisor. This does not happen often, but can happen on occasion.

D. Do the parole officers at this institution flex their time, work alternative schedules?

Staff are encouraged to flex their time during the FLSA work week as necessary.

E. How do inmates gain access to meet with parole officers?

Parole Officers meet with R&D offenders in staff dining, Monday through Friday, during the morning hours, by utilizing the lay-in process. Parole Officers meet with GP offenders, Tuesday through Thursday, in the morning hours in the Visiting Room, utilizing the lay-in process. If offenders are in PC, Ad Seg or TCU, officers go to them. If a situation arises, officers will also go to the housing units after calling the control room officer to check availability. Offenders can submit correspondence at any time and request to meet with P&P.

F. Average caseload size per parole officer? **230**

- # of pre-parole hearing reports per month? **98**
- # of community placement reports per month? **7**
- # of investigation requests per month? **94**

G. Are there any services that you believe parole officers should be providing, but are not providing?

There are some officers in the ERDCC Parole Office that have completed Pathways to Change facilitator training and have expressed an interest in teaching such. They are available as needed. Staff have attended MRP/TAP training and can assist in whatever way the institution wishes to utilize them.

H. If so, what are the barriers that prevent officers from delivering these services?

No barriers are noted.

I. What type of inmate programs/classes are the parole officers at this institution involved in?

Parole Officers are currently involved in the Friends and Family Orientation Program. Due to staff shortages and the number of new staff, the Pre-Release Program was put on hold this year. We plan on starting it back up in the near future.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

We continue to strive for innovative methods to maintain our fiscal responsibility during the current budgetary climate.

16. Does your institution have saturation housing? **No** If so, how many beds? **N/A**

17. Radio/Battery Needs:

a. What is the number of radios in working condition?

There are 572 radios in working condition, only 1 is not.

b. Do you have an adequate supply of batteries with a good life expectancy?

Yes, there are an additional 70 new batteries at present.

c. Are the conditioners/rechargers in good working order?

All of the conditioners/rechargers are in good working order.

Joint Committee on Corrections 2014

Information for Legislative Institutional Visits

Facility Name: Farmington Correctional Center			
Custody Level	C-1 and C-2	Warden	Tom Villmer
Total Acreage	350	Address	1012 W. Columbia
Acreage w/in Perimeter	115		Farmington, MO 63640
Square Footage	117359	Telephone:	573-218-7100
Year Opened	1986	Fax:	573-218-7110
Operational Capacity/Count (as of December 19, 2014)	2655/2642		
General Population Beds (capacity and count as of December 19, 2014)	1798/1790	Deputy Warden	Mike Gann Ext. #203
Segregation Beds (capacity and count as of December 19, 2014)	175/132 base 166 body	Deputy Warden	Tami White Ext. #206
Treatment Beds (capacity and count as of December 19, 2014)	324/323	Asst. Warden	Bill Bowyer Ext. #395
Work Cadre Beds (capacity and count as of December 19, 2014)	N/A	Asst. Warden	Bob Peura Ext. #400
Diagnostic Beds (capacity and count as of December 19, 2014)	N/A	Major	Jim Gober Ext. #251
Protective Custody Beds (capacity and count as of December 19, 2014)	N/A		
MOSOP (capacity and count as of December 19, 2014)	276/276		
Mental Health (capacity and count as of December 19, 2014)	120/117		
Youthful Offender Program (capacity and count as of December 19, 2014)	20/9		

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

Assessment of the overall condition of FCC's physical plant is poor to fair, and what is to be expected at this point considering the age of the components.

b. What capital improvement projects do you foresee at this facility over the next six years?

Parking lot lighting is in need of an update as the parking lots have been expanded but no additional lighting added.

Southwest wall of building #14 wall is bulging; the condition of this wall continues to deteriorate adding to the threat of collapse, which is a safety hazard.

Emergency generator for Main Production food service area; this area has no emergency back-up power making it extremely difficult to prepare food during extended outages and creates unsafe working conditions for staff and offenders.

Housing Unit #30 all air handlers need replaced, they are beyond their expected working life, confirmed by Visual Facility Assessment (VFA). Plumbing and electrical issues also need to be addressed.

Building #28 needs updates to plumbing and electrical systems.

Buildings #18 and #19 heating systems require extensive repairs; replacement of air handler systems recommended, aged leaking water systems in walls make repairs difficult, time consuming and costly. Many of the radiator type wall units have been piped through to eliminate leaks greatly reducing effectiveness of the units and the system. This job is currently being conducted.

Building #14/Main Production roof top freezer units are old and failing, they need replaced.

Housing Units #6-#9 (B-Side) rooftop HVAC units need replaced, VFA confirmed units are well beyond their expected service life.

Building #29 roof top HVAC unit needs replaced; this unit is especially old and in constant need of repair, VFA also confirmed need to replace.

Cottage Row buildings need wood trim repairs/replacement. Partially complete

Building #29 and Housing Unit #30 needs extensive tuck pointing. Rain water infiltrating the walls make it impossible to maintain interior walls and continues to deteriorate and weaken the infrastructure. Have attempted to start tuck pointing and rehabbing

The tuck pointing that is listed should be considered a partial listing only. Every building at FCC has some tuck pointing issues and needs to be sealed due to water issues. Each month, year, etc that goes by only adds more areas to the list of buildings that are in need of this care. In order for the interior of a building to be kept in the best possible condition, the outside of the structure must be kept sound and safe from the elements. The most serious problem relates to the need of many of FCC's buildings needing new roofs.

Tuck pointing has started in Housing Unit #10.

Utility Tunnel between Housing Unit #10 and Housing Unit #30 roadway surface/tunnel roof deteriorating creates concerns of collapse of the tunnel. This has been shored up with steel until a permanent fix can be scheduled and funded.

Building #34 Power Plant, the penthouse parapet wall needs tuck pointing. Brick wall is visibly leaning and is close to failure.

Road surfaces are in very poor condition and need to be replaced/resurfaced; perimeter roads as well as roadways within the institution. These conditions can damage equipment, slow vehicular traffic during emergencies and create tripping hazards for offenders and staff alike. Patched large holes but need entire surface capped.

All three of the main power plant boilers are in desperate need of updated controls as what is on there is outdated and obsolete. The controls on there now cannot be purchased anymore and when these are gone we will not have that boiler. One boiler of three is now out of service.

At the water treatment plant there are 7 small Lochinvar boilers and the control boards are now obsolete on these and will need to be updated as soon as possible. One domestic boiler is out of service.

- c. How critical do you believe those projects are to the long-term sustainability of this facility?**

All the areas of our concerns listed are vital to the long-term sustainability of this facility.

2. Staffing:

- a. Do you have any critical staff shortages?**

While all shortages put a strain on resources, the most critical is in Custody due to high turnover and the lag time between when an individual is hired and when they are ready to be placed on shift.

- b. What is your average vacancy rate for all staff and for custody staff only?**

All staff average is 12 (1.7%); Custody average is 7 (1.6%) based on 675 total employees and 427 custody employees.

FCC MONTHLY VACANCIES
Fiscal Year 2014

MONTH	YEAR	CUSTODY	NON-CUSTODY
July	2013	*15	10
August	2013	5	10
September	2013	15	8
October	2013	10	6
November	2013	4	1
December	2013	1	4
January	2014	6	2

February	2014	4	5
March	2014	4	5
April	2014	8	8
May	2014	5	4
June	2014	9	4

*Reflects 12 (11-COI's, 1-COII) new custody positions added for Juvenile Unit

FCC Vacancies as of December 10, 2014

Class Title

SET I/II/III	1
COI	4
CSI	1
SKI	1
SACII	1
VESII	1
COOK II	1
COOK III	1

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

Yes, we try to keep accrual of comp-time to a very minimum. However, we must man the institution and cover mandatory posts.

d. What is the process for assigning overtime to staff?

Ask for volunteers, and then use a mandatory list if necessary.

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

Approximately 70% of comp time accrued is paid off; 30% is used

f. Is staff able to utilize accrued comp-time when they choose?

Supervisors make every effort possible to approve compensatory time off at the staff member's choosing. There are instances when the request has to be denied due to having to fill all mandated custody posts, as not to jeopardize the safety of staff/offender or negatively affect the security of the institution. If this situation arises, efforts are made to accommodate the staff members by approving the time off on another date of the officer's choosing.

3. Education Services:

a. How many (and %) of inmate students at this institution are currently enrolled in school?

FCC Education has 430 students currently enrolled out of the 2,312 offenders housed. This translates to approximately 19% of the FCC offender population enrolled in Education. An additional 72 offenders (3%) of the population are on a waiting list due to their unavailability, i.e. segregation, orientation, etc. Education services are also provided by Unitec for the FTC/FITP (Housing Unit #10) offenders. Although these numbers are not readily available, they successfully provide services to approximately 100 offenders at any given time.

b. How many (and %) of inmate students earn their HSE each year in this institution?

From March 2014 until November 2014, 112 FCC offenders earned their high school equivalency. Due to change in testing, no testing was completed in January and February. This results in approximately 26% of students enrolled in FCC Education earning their HSE in a nine month period. We anticipate, during a full calendar year, a total of 150 offenders earning their high school equivalency resulting in 35% of enrolled students receiving their HSE which is a slight increase from last year's report.

c. What are some of the problems faced by offenders who enroll in education programs?

Many offenders lack the motivation needed for success and are unable to see the importance of education. They often experience an increased feeling of hopelessness and failure once incarcerated. Many of them did not complete their education prior to incarceration due to lack of interest, lack of self-control, and minimal social skills. These offenders may find the transition from freedom to incarceration very difficult which often lead to behavior issues and placement in segregation. Also, many have physical or mental health disabilities directly impacting their ability to learn and retain information. Although some may not earn their High School Equivalency, daily social interaction with other students has an overall positive effect.

In addition to the personal issues experienced effecting their enrollment, there are several environmental factors. Due to lack of funds, many repairs/upgrades are needed in the Education Department. Extreme temperatures within the building lead to a decrease in student participation and an increase in behavior issues. In some instances, classrooms have been temporarily shut down and teaching staff relocated. Water leaks within the institution have also effected the Education Department occasionally requiring the suspension of classes.

Another concern which directly impacts the offenders in Education is the expectation of completing multiple programs simultaneously. Although Education is mandatory for offenders who do not have a high school equivalency, many students are required to complete additional programs. Maintaining that Education takes priority and is stipulated by state statute remains a struggle making scheduling difficult and monitoring/enforcing attendance often impossible. Examples of conflicting programming are: Missouri Sex Offender Program, Long Term Treatment, and mental health appointments/classes related to the Social Rehabilitation Unit.

4. Substance Abuse Services:

a. What substance abuse treatment or education programs does this institution have?

Farmington Treatment Center (FTC): 84 days

Farmington Intermediate Treatment Program (FITP): 6 months

Long-Term Treatment Program (LTP): 1 year

b. How many beds are allocated to those programs?

Farmington Treatment Center (FTC) has 194 beds

Farmington Intermediate Treatment Program (FITP) has 130 beds

Long-Term Treatment Program (LTP) has 30 beds. Long-Term offenders are housed in general population settings.

c. How many offenders do those programs serve each year?

Farmington Treatment Center (FTC) - 790 Offenders

Farmington Intermediate Treatment Program (FITP) - 260 Offenders

Long-Term Treatment Program (LTP) - 35 Offenders

d. What percent of offenders successfully complete those programs?

Farmington Treatment Center (FTC) - 87%

Farmington Intermediate Treatment Program (FITP) - 87%

Long-Term Treatment Program (LTP) - 96%

e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

Everyone agrees security is the primary mission, treatment often requests more flexibility. Also, most prison staff members have been trained in a role that was primarily custodial. Treatment demands more involvement and the transition is difficult for many, especially without specialized training.

In an ideal treatment setting, those receiving treatment would be isolated from others. This is not practical for many treatment units.

Finally, the prison regimen (counts, appointments and meals) is often difficult to schedule around.

5. Vocational Programs:

a. What types of vocational education programs are offered at this institution?

Applied Computer Technology

b. How many offenders (and %) participate in these programs each year?

Approximately 60-70 offenders participate each year. At any given time, less than 1% of the population participates in on-site Vocational Education.

c. Do the programs lead to the award of a certificate? **Yes**

d. Do you offer any training related to computer skills?

Yes, the entire curriculum relates to obtaining and/or improving computer skills.

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution?

Laundry provides laundry and dry cleaning services for a variety of sources. MVE Laundry also designs and builds laundry carts.

The Clothing/Mattress Factory manufactures the following items: Aprons, offender work coats, jackets, Q/L jackets, coveralls, work pants, Battle Dress Uniform, shirts and pants, oven mitts, tube socks, ankle socks, laundry bags, laundry cart liners, mop heads, pillows, foam core mattresses, inner-spring mattresses, mattress covers, shower curtains, cylinder lint bags, file bags, mail bags, Battle Dress Uniform pants and shirts, jackets and coveralls in a digital print camouflage rip stop material and we now offer Correctional Officer coats.

- b. How many (and %) of offenders work for MVE at this site?

Laundry employs 219 offender workers at this time, but has the capacity to employ 240. At the Clothing/Mattress Factory, 54 offenders are currently employed. This equates to approximately 9% of the total offender population. We are capable of having 60 offender workers at one time in the Mattress Factory.

- c. Who are the customers for those products?

Laundry customers are as follows: St. Joseph East (St. Charles), DePaul, St. Mary's, Cardinal Glennon Children's Hospital, St. Joseph West (Lake St. Louis), St. Clare, St. Joseph Medical Park, Ste. Genevieve County Memorial Hospital, FCC (laundry and dry cleaning), ERDCC (dry cleaning), PCC (dry cleaning), SECC (dry cleaning), and Park Hills and Farmington Police Department (dry cleaning).

The Clothing Factory has several different customers that we deal with. The Department of Corrections is the main customer. Other customers include state employees, state hospitals, police departments, probation and parole, fire/ambulance districts, colleges and universities. Offenders are able to purchase clothing items through the MVE basic catalog. All orders are taken at the sales office in Jefferson City.

- d. What skills are the offenders gaining to help them when released back to the community?

Laundry: Offenders gain a sense of good work ethic and responsibility with employment in a large-scale factory. Offenders learn a number of different skills and job experiences, which include: Operating large commercial size washers, dryers, flat work irons and dry cleaning equipment. Some offenders have gained experience in personal computer data entry, fundamental record keeping, filing and inventory control. MVE Laundry also has a reliable maintenance department, which provides hands-on training on this commercial laundry equipment.

Computer Literacy is a five-step format for the general knowledge of a computer: (a) Computer basic; (b) Windows, Works; (c) Numbers; (d) Web. The other program is Work

Place Essential Skills Literacy Link. This program helps develop skills involving employment such as: Finding a job, keeping a job, interviewing techniques, resumes, application skills, and communication skills.

MVE Laundry is currently in coordination with the Department of Labor (DOL) on an apprenticeship program. There are approximately 50 job occupations listed under this program for offender workers. To enter this program an offender completes an application. The appropriate DOL occupational title is assigned, along with the total of accumulated working hours under this occupation, and then sent to DOL toward an apprenticeship certificate. The number of hours required for an apprenticeship certificate is determined by the occupational title.

Clothing Factory: Offenders gain several different skills by working at the factory. Most workers learn to use several different types of sewing machines to make clothing, this is a very valuable skill taught to the offenders. Some also learn to layout, measure and cut patterns using various measuring and cutting tools as well as learning calculation formulas. We teach quality control and attention to detail when offenders inspect and package products for shipment. Offenders are held highly responsible for tools they check out daily. In addition, several employees learn different computer skills and are responsible for daily office functions. All offenders are taught how to make a quality product, the value of showing up to work daily, on time and prepared for work.

7. Medical Health Services:

a . Is the facility accredited by the National Commission on Correctional Health Care?
Yes

b . How many offenders are seen in chronic care clinics?

2193 chronic care enrollments. This may mean that there are offenders in multiple clinics; however, they are seen independently in each clinic depending on protocol.

c . What are some examples of common medical conditions seen in the medical unit?

Sore throat, athletes foot, allergies, infections, muscle strains/sprains.

d . What are you doing to provide health education to offenders?

We provide education with each offender encounter to include brochures, as well as have a big health fair available to offenders each year. Education is also provided on the offender information channel.

e . Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **No**

f . Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.

Yes, the amount of chronic care encounters has risen and remains on the rise. The aging offender population poses great challenges while incarcerated relating to ambulation and

self care deficits. These issues will only get worse with the continued aging of the offender population.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?

Offenders transferring in to FCC are seen in medical by the transfer/receiving nurse. The transfer/receiving nurse provides all offenders with a pamphlet explaining what types of services are offered by mental health and how to access those services. Offenders with a MH score of 3 are seen within 14 calendar days for an initial evaluation. Offenders with an MH score of 4 or above are seen within 24 hours of their arrival. All offenders, regardless of their mental health score, can request a mental health appointment by submitting a health services request. Once they submit a request, they are seen within 5 working days of the request. Staff that have concerns about offenders mental health can refer offenders to mental health either by using a referral form or by contacting mental health through e-mail or telephone. Offenders in the segregation unit are seen weekly by a qualified mental health professional who conducts ad seg rounds. This gives them the opportunity to report any problems they may be experiencing while in the segregation unit.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

There was one successful suicide during the past year at FCC. That is less than .03% of the population. Suicide prevention training is provided to all staff during core training. Qualified mental health professionals assess for suicidal ideations during each appointment.

- c. Approximately how many of the offenders in this institution are taking psychotropic medications?

At the end of November there were 413 offenders prescribed psychotropic medications, or 15.8% of the population. This number can vary greatly as many offenders go on and off of medications for various reasons.

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

There are currently 474 offenders in the mental health chronic care clinic. Of those, 310 are currently living in general population, 45 are in the Farmington Treatment center, 100 are in the Social Rehabilitation Unit, and 19 are in CTC. The numbers of offenders that are considered seriously mentally ill would vary greatly at any given time. All mentally ill offenders are seen at least monthly by their assigned qualified mental health professional. Mentally ill offenders with a MH score of 3 are seen at least every 90 days by their treating psychiatrists. Offenders with a MH score of 4 or above are seen at least once per month by their treating psychiatrist. All mentally ill offenders are monitored for medication compliance, changes in symptoms, and provided with education/counseling about how to cope with symptoms of mental illness. Nursing staff provide education about medications and the importance of medication compliance. Qualified mental health professionals also

advocate on behalf of the offender when issues related to their ability to function in the correctional setting leads to conduct violations or extended periods of time in the administrative segregation unit. Qualified mental health professionals provide therapeutic/educational groups to all offenders who wish to participate in groups. Offenders with mental illness that are being released from incarceration are provided assistance with discharge planning. Our goal is to connect the offender with resources in the community in hopes that if they remain mentally stable they will not return to incarceration. Nursing staff also meet with offenders for metabolic monitoring and to discuss medication non-compliance. They work with the offender to encourage medication compliance and address any barriers to compliance.

9. What is your greatest challenge in managing this institution?

Staff issues, followed closely by physical plant and budget constraints are our greatest challenges. The greatest challenge for custody in managing this institution is ensuring the security of the institution and the safety of the staff and offender population is maintained at an acceptable level by providing/assigning custody staff to all areas of the institution 24 hours a day, seven days a week. This is largely affected by custody staff on extended sick leave, light duty requirements, or continued medical problems covered by FMLA. The next greatest challenge is the buildings of the institution, some that are almost 100 years old and require a large amount of maintenance. With the budget restraints it has become increasingly difficult to keep up with the required maintenance in all areas.

10. What is your greatest asset to assist you in managing this institution?

The high quality of staff is our greatest asset. FCC is truly blessed with high quality staff members who have many years of corrections experience. These same staff members have a willingness to mesh with all work sections to reach a common goal. The FCC staff are motivated, conscientious, and have strong work ethics.

11. What is the condition of the facilities vehicle fleet? (Mileage, old vehicles, etc)

The condition of this facilities vehicle fleet are as follows.

Uplander	Year	Mileage
13-188	2007	145,089
13-334	2008	117,944
13-1014	2005	110,142

Impalas		
32-225	2008	99,962
32-228	2008	138,203
32-231	2008	116,432
32-237	2008	107,191
13-728	2003	180,800

Crown Victoria		
13-190	2007	109,324
13-495	2007	105,869

Vans		
13-186	2008	73,223
13-197 (Dog Team)	2005	83,628
13-220	2012	20,602
13-725	2014	33,356
Jeep		
13-196	1998	98,981
Bus		
13-175	2010	37,082

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (**Please have the Major answer**)

Morale is measured differently by different employees. Locally, there is very little we can do to improve morale over what we already do. The administrative team supports the work force in a very unified and positive way. Feedback from line staff is often forwarded up the chain of command and results in positive change. The workforce at FCC overall is still exceptional.

Staff continue to have concerns about pay. We have custody and other staff who work several jobs and or receive some sort of assistance in order to provide for themselves and their families. They have not seen a substantial pay raise in some years and continue to struggle to try to make ends meet. Experienced staff also struggle with the fact that there are no within grade raises, so a relatively new staff member makes the same as someone with years of experience. They believe that there should be a pay differential for tenure. While the question was asked for custody staff I believe this applies to all staff. However, I believe that morale is good overall and would be rated as medium to high.

13. Case managers:

a. How many case managers are assigned to this institution?

29 total Corrections Casemanager I's and Corrections Casemanager II's for DAI

3 total Corrections Casemanager III's for DORS

2 total Corrections Casemanager III's for DAI

1 total CCMII serves as the Impact of Crimes Victims Coordinator and Restorative Justice Coordinator

***DAI – Division of Adult Institutions**

****DORS – Division of Offender Rehabilitative Services**

b. Do you currently have any casemanager vacancies? **No**

c. Do the casemanagers accumulate comp-time?

Only the DORS CCM III's at straight time.

The DORS Casemanager III's who work four, 10-hour work days per week do accumulate compensatory time if a holiday falls on their regular day off during the work week. They are also allowed to use it to take time off. CCMI/II's can (if needed) but are encouraged to use quickly.

d. Do the casemanagers at this institution work alternative schedules?

Casemanagers work a set schedule each week. DAI Casemanagers work five, 8-hour days, Monday through Friday, and DORS Casemanagers work four, 10-hour days. Staff members modify their schedules to meet institutional needs.

e. How do inmates gain access to meet with casemanagers?

Casemanagers have scheduled office hours (2-hours during the morning and another 2-hour period in the afternoon) that they are available to meet with offenders. These times are posted for offender review. The Casemanagers are available either in their office, in the housing unit, or in the Casemanagers office in the classification pod. Offenders may also write to the Casemanagers through the inside mail.

f. Average caseload size per casemanager? **Approximately 100 (treatment 75 and general population 100)**

- # of disciplinary hearings per month? **Approximately 18 per Casemanager**
- # of IRR's and grievances per month? **5 IRR's and 0 grievances per Casemanager ***
- # of transfers written per month? **Approximately 2 per month per Casemanager**
- # of re-classification analysis (RCA's) per month? **Approximately 11 per Casemanager**

***An assigned CCMII who reports directly to the Warden handles all grievances for the Institution. There were 658 as of December 18, 2014 or about 55 per month. This CCM also processed 345 grievance appeals, or about 29 per month.**

g. Are there any services that you believe casemanagers should be providing, but are not providing? **No.**

h. If so, what are the barriers that prevent casemanagers from delivering these services? **N/A**

i. What type of inmate programs/classes are the casemanagers at this institution involved in?

Re-entry Process, Reception and Orientation, Substance Abuse, Work Release, Restorative Justice, Impact of Crime on Victims, Pathways to Change, Anger Management, Inside Out Dads, Employment Skills/Life Skills.

j. What other duties are assigned to casemanagers at this institution?

Compiling offender reports (progress, inter-office communications), maintaining/reviewing offender files, arranging housing assignments, monitoring offender interviews, conducting investigations, developing offender contracts, auditing offender property, conducting safety/security inspections, issuing hearing violations, providing offender instructions, dispensing/reviewing offender forms, processing offender requests, facilitating individual growth (self-help programs, counseling), providing notary services, processing critical

illness and death notifications, attending staff meetings, performing special assignments (conducting tours, performing committee work, managing supply inventory, conducting classification hearings, protective custody/administrative segregation reviews), and periodically acting as Functional Unit Manager, visiting application processing, office hours, job changes, room changes, coverage of library, searches, coverage of other areas in the institution, training, orientation, and other duties established in IS 1-1.2.

14. Institutional Probation and Parole officers:

- a.** How many parole officers are assigned to this institution? **9 PO's, 1 POIII**
- b.** Do you currently have any staff shortages? **No**
- c.** Do the parole officers accumulate comp-time?

Generally no, as they are permitted to flex time within the same week, but on occasion comp time is accrued.

- d.** Do the parole officers at this institution flex their time, work alternative schedules?

Yes to all.

- e.** How do inmates gain access to meet with parole officers?

Open office hours or requests through kites, other staff.

- f.** Average caseload size per parole officer?

Between 200-300 each, this is difficult to ascertain as they are assigned to housing units and other specialty caseloads.

- # of pre-parole hearing reports per month? **41**
- # of community placement reports per month? **45**
- # of investigation requests per month? **110**

- g.** Are there any services that you believe parole officers should be providing, but are not providing?

If time permitted more involvement with transitional housing unit services.

- h.** If so, what are the barriers that prevent officers from delivering these services?

Caseload and the work associated with those caseloads.

- i.** What type of inmate programs/classes are the parole officers at this institution involved in?

Transitional Housing Unit, Puppies for Parole, Pre-Release Classes and Job Fairs.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

The interpretation of FMLA and suspected abuse of its provisions continue to be a struggle for us.

Adhering to P.R.E.A. provisions has proven to be a substantial workload increase, with no additional staff allocated for this purpose.

There is currently insufficient I.T. support at this site.

The ability to get the aging buildings and grounds repaired due to budget restraints.

16. Does your institution have saturation housing? If so, how many beds?

FCC does not have saturation housing at this time. A plan has been submitted to the Division of Adult Institution, Central Office, recently concerning the possible use of saturation housing at FCC, if needed.

17. **Radio/Battery Needs:**

a. What is the number of radios in working condition? **524**

b. Do you have an adequate supply of batteries with a good life expectancy?
Yes, we have adequate batteries for the foreseeable future.

c. Are the conditioners/rechargers in good working order?
Yes, all conditioners/rechargers are operational.

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Fulton Reception and Diagnostic Center				
Custody Level	Maximum		Warden	Billy D. Harris
Total Acreage	111		Address	1393 Highway O
Acreage w/in Perimeter	60			Fulton, MO 65251
Square Footage	431,510		Telephone:	573-592-4040
Year Opened	1987		Fax:	573-592-4073
Operational Capacity/Count (as of December 1, 2014)	1302			
General Population Beds (capacity and count as of December 1, 2014)	1506		Deputy Warden	Michael B. Payne Offender Management
Segregation Beds (capacity and count as of December 1, 2014)	120/91		Deputy Warden	Dan Redington Operations
Treatment Beds (capacity and count as of December 1, 2014)	15/14		Asst. Warden	Shawn Twyman
Work Cadre Beds (capacity and count as of December 1, 2014)	200/193		Major	Scott Colter
Diagnostic Beds (capacity and count as of December 1, 2014)	408/214			
Protective Custody Beds (capacity and count as of December 1, 2014)	N/A			

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution? **The overall condition of the physical plant is fair. This facility is 27 years old and has been over populated most of the time, which has taken its toll on the overall physical plant.**

The bigger items such as the boilers, generator, water softeners, air handlers and heat exchangers are presenting even more challenging problems due to the age, wear and tear. All are near or past their rated life expectancy but due to an extensive preventative maintenance program are still operational.

b. What capital improvement projects do you foresee at this facility over the next six years? **Replace roofs on housing units 6, 7 and C Buildings along with 2 heat pumps and 14 roof exhaust fans. Roofs still have the ballasted rubber roof systems that have been patched many times and are still leaking at this time.**

Replacement of taut wire and Del-Norte Fence Security Systems. Both are obsolete and parts are no longer available. Security system are less than reliable posing immediate security concerns.

Replace exterior sliders on 4 house and A building. They are 27 years old and the doors and frames are rusted out.

Replace 12 simplex fire panels and related hardware. All are old and obsolete. We have calls on the fire panels weekly, and sometime daily. Fire alarm systems are less than reliable posing safety concerns for staff and offenders.

- c. How critical do you believe those projects are to the long-term sustainability of this facility? Extremely critical, if and when the HU 20 touch screen unit fails, the entire housing unit doors will have to be manually opened and closed. This process is extremely staff intensive and will greatly reduce security within the housing unit. The fire alarm system is iterated into this system as well as lighting, HVAC and intercom systems.

2. Staffing:

- a. Do you have any critical staff shortages? Overtime is sometimes necessary to maintain critical custody staffing, in the event of hiring delays or call-ins.
- b. What is your average vacancy rate for all staff and for custody staff only? Our average vacancy for all staff is 5 to 9 positions and vacancy rate for custody staff is 4 to 8 positions vacant at any given time.
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? Yes, often staff accrues overtime more often on 3rd and 1st shifts. Operating below critical levels does not afford the opportunity to shift commanders to allow staff member time off to reduce compensatory time on a regular basis.
- d. What is the process for assigning overtime to staff? Overtime is assigned first by asking for volunteers, if a staff member volunteers they are moved to the bottom of the mandatory overtime list. If a staff member is mandated, they are moved to the bottom of the mandatory overtime list.
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? Approximately 78% of comp time accrued is paid off; 22% is used.
- f. Is staff able to utilize accrued comp-time when they choose? Due to current staffing levels, staff utilizing accrued compensatory time is not guaranteed. This is determined by the needs of the shift and available staff to work. This is a contributing factor of staff members requesting to be paid for compensatory time instead of taking the time off.

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? (0 %) FRDC Education deals with the diagnostic Education process and therefore does not have an Academic school. In the recent past we have given offenders who do well on Academic screening to study for their High School Equivalency testing.
- b. How many (and %) of inmate students earn their HSE each year in this institution? (100 %) November 25, 2014 saw the first group of five offenders to ever test at FRDC. Of those 5 all passed the test. Five more tested on December 12, 2014 (results are pending).
- c. What are some of the problems faced by offenders who enroll in education programs? Offender who enroll in Education programs in the Department of Corrections in general have the challenge of having not been in school for many years so they have forgotten many skills and are sometimes frustrated with themselves. They do seem to take pride in their accomplishments when they do make any advancement toward their Education.

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have? *The Ambulatory Restricted Mobility (ARM) and an assessment unit. ARM is a specialized 84-day program serving offenders sentenced to short-term institutional treatment who have various medical/mobility issues that hinder or prevent them from being able to participate in other ITC settings. The assessment unit is responsible for administering the DOC approved substance abuse assessment to board and court offenders stipulated for treatment, prior to being transferred to a substance abuse program.*
- b. How many beds are allocated to those programs? *ARM has 15 beds, most of which require some type of special accommodation, i.e. wheelchair or other high risk needs.*
- c. How many offenders do those programs serve each year? *RM has the capacity to serve 60-70 special needs offenders per year. The assessment unit completed approximately 58 assessments during FY14. Their sentence types vary (559.115, 217.785, board, CODS, MPTC).*
- d. What percent of offenders successfully complete those programs? *93% successful, 5% unsuccessful, and 2% no fault.*
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? *The short time frame which doesn't really allow us to address the offenders chronic care problems and cognitive belief issues, along with the need for providing adequate training to treatment staff relative to their profession.*

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution? *We offer no (vocational) Career and Technical programs at FRDC due to being a diagnostic center.*
- b. How many offenders (and %) participate in these programs each year? *N/A*
- c. Do the programs lead to the award of a certificate? *N/A*
- d. Do you offer any training related to computer skills? *No*

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution? *FRDC does not have a Missouri Vocational Enterprise.*
- b. How many (and %) of offenders work for MVE at this site? *N/A*
- c. Who are the customers for those products? *N/A*
- d. What skills are the offenders gaining to help them when released back to the community? *N/A*

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? *Yes*
- b. How many offenders are seen in chronic care clinics? *720*
- c. What are some examples of common medical conditions seen in the medical unit? *Back pain, diabetes, COPD, headaches, rashes, seizures, joint pain, sports injuries, nebulizer treatments, blood pressure checks and medication distribution.*
- d. What are you doing to provide health education to offenders? *Through Chronic Care clinics patients receive education that is directly related to their health condition. Patients receive education at each sick call visit from the nurse. Patients in PERM housing units are offered attendance to the Health Fair Annually where booths are provided to give education towards healthy lifestyles.*
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? *No*

f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain

Yes, patients are increasing in age. We are seeing a greater number of patients with several medical conditions. With the aging population, you see an increase in patients needing ambulatory aides and special housing accommodations. Special dietary concerns are in place with elderly offenders to ensure that they consume the appropriate amount of calories daily.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services? Offenders are seen upon intake for a Mental Health Assessment. They are also see through self advocacy via Mental Health Services Request forms and Staff Referrals.
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? One. Staff referrals are an important piece to suicide prevention. Mental Health Services provides CORE training on suicide prevention on an on-going basis.
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? 232 out of 1527 or 15%.
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? 237 out of 1527 or 15%.

9. What is your greatest challenge in managing this institution? The greatest challenge to managing FRDC is offender numbers vary at all times. FRDC does not have control of the volume of offenders that arrive at the facility. County jails can continue to bring offenders to the institution when we are at our capacity. Also staffing is an issue with the constant overcrowding of offenders in the housing units.

10. What is your greatest asset to assist you in managing this institution? The greatest asset to FRDC is the diverse background of our Administration staff. The staff has many years of service with the Department of Corrections; also have knowledgeable experienced line staff. We only have diagnostic operations here at FRDC; we do not have at this time various mainline facets of Corrections.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

We have a total of 29 vehicles in the fleet including the 5 vehicles Cremer utilizes. The majority of the vehicles are in fair to good condition due to the maintenance provided on a continuous preventive maintenance schedule. We did receive one new bus this year and we purchased 2 used vans. We also traded one of our low mileage jeep Cherokees for a new Dodge caravan. The following vehicles need to be replaced due to high mileage, and poor physical condition resulting in high maintenance repair costs. Jeep Cherokee 13-0008 at 190,000 miles, 1995 Dodge Van 13-0217 has extensive rust and corrosion on both the body and framework. Crown Vic 13-0209 180,000 miles, Crown Vic 13-0511 175,000 miles, Chevrolet Impala 13-0152 is currently out of service due to blown head gasket. Bus 13-0401 has 261,000 miles and should be replaced in the next couple years.

The following maintenance vehicles are all in poor condition physical condition and should be replaced mainly due to their use as snow removal vehicles. Chevrolet Truck 13-0207 is a 1986 model and was a primary snow removal vehicle all its life the frame and body are severely rusted. 1986 GMC dump truck 13-0214 has low mileage however the frame and body is severely rusted due to its use as a snow removal vehicle. 1998 Dodge pickup 13-0719 again has low mileage but is in poor physical condition as it is also used as a snow removal vehicle.

FRDC also maintains Cremer Vehicles. The following Cremer assigned vehicles should be replaced due to poor physical condition. 1994 Dodge Van 13-0150 has extensive corrosion/rust. 2003 Ford E350 13-0199 has high mileage and continuous mechanical problems resulting in high maintenance costs.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

The overall morale for Custody staff members is medium to low. Many staff members work second jobs. There are staff members who are not loyal to the department, which brings morale down. There are not incentives for our staff to actively recruit others and encourage those individuals to become a member of the department. The elimination of matching funds for retirement, the increased vesting time for retirement from 5 years to 10 years, new employees must contribute 4% of their pay towards retirement, and the elimination of tuition reimbursement for staff are all concerns. All these actions have greatly decreased staff morale and staff routinely state nothing is getting better only worse.

13. Case Managers:

- a. How many case managers are assigned to this institution? **17 Corrections Case Worker II's
2 Corrections Case Worker III's**
- b. Do you currently have any case managers vacancies? **Yes we have one Case Manager II position reallocated to FRDC through attrition.**
- c. Do the case managers accumulate comp-time? **No**
- d. Do the case managers at this institution work alternative schedules? **Yes**
- e. How do inmates gain access to meet with case managers? **The offenders can write a note and send it through the institutional mail. There are also Classification and Assignment staff assigned to the housing units that make daily rounds on the unit, allowing the offender's time to speak with them as well.**
- f. Average caseload size per case manager? **Based on 1,500 population (188 to 1) based on 8 Corrections Case Worker II's. (All other Case Workers are assigned to C&A.)**
 - # of disciplinary hearings per month? **Average 200**
 - # of IRR's and grievances per month? **Average 5 per Caseworker per month**
 - # of transfers written per month? **Average 25**
 - # of re-classification analysis (RCA's) per month? **Average 25**
- g. Are there any services that you believe case managers should be providing, but are not providing? **No**
- h. If so, what are the barriers that prevent case managers from delivering these services? **We feel we are providing all necessary services.**
- i. What type of inmate programs/classes are the case managers at this institution involved in? **FRDC is committed to Reentry and offers the following programs to assist in offenders' reintegration into society: Pathways to Change, Impact on Crime Victims Class (ICVC) and Inside Outside Dads.**
- j. What other duties are assigned to case managers at this institution? **Other assigned duties include: ID cards, PREA, and PREA intake screener. The C&A area at FRDC is also responsible for collecting all the information from each department (Medical, Mental Health, Education/Vocational, Receiving, Records, etc.) and compiling it to form a Classification level catered to each offender. An individual's information such as previous incarceration history, sentence structure, marital status, medical and mental health needs, past employment, and pending charges all affect the overall Custody level of the offender. The process may sound simple, but when dealing with sensitive sentencing such as Sex Offenders (MOSOP), Treatment**

(PCT, CODS, ITC, SIP, LTC, etc.) WOH (Waiver of Hearing) files, and regular Diagnostic files all requiring different time frames imposed by the courts or P&P Board, this is not a simple task. Timely, accurate, and precise efforts from staff are essential from each member of the C&A team.

14. Institutional Probation and Parole officers:

- a. How many parole officers are assigned to this institution? **11 - PO II's**
1 - PO III (Supervisory Position)
- b. Do you currently have any staff shortages? **No**
- c. Do the parole officers accumulate comp-time? **Yes**
- d. Do the parole officers at this institution flex their time, work alternative schedules? **When feasible they flex their time, or adjust their work schedule.** However, this is not always possible.
- e. How do inmates gain access to meet with parole officers? **We have open door for the perms once a month. Otherwise the inmates can request a meeting via a "kite".**
- f. Average caseload size per parole officer? **Varies depending on population. Based on 1,500 population (136 to 1)**
 - # of pre-parole hearing reports per month? **80 average**
 - # of community placement reports per month? **1 average**
 - # of investigation requests per month? **45 average**
- g. Are there any services that you believe parole officers should be providing, but are not providing? **No**
- h. If so, what are the barriers that prevent officers from delivering these services? **N/A**
- i. What type of inmate programs/classes are the parole officers at this institution involved in? **A representative from this section attends friends and family orientation.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

FRDC would like to bring to the committee's attention our concerns reference staffing, especially in the area of custody. We currently operate at critical staffing levels.

The age of the institution and its equipment requires on-going focus on maintenance repair and replacement of areas. Improvements are difficult as the majority of funds go for repair and general upkeep costs.

16. Does your institution have saturation housing? If so, how many beds? Yes, FRDC has an official saturation housing capacity of 464 beds.

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? **228 total. 227 currently operational, one is out of service and scheduled to be repair next quarter.**
- b. Do you have an adequate supply of batteries with a good life expectancy? **At this time, yes.**
- c. Are the conditioners/rechargers in good working order? **At this time, yes.**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Jefferson City Correctional Center				
Custody Level	Medium / High		Warden	Jay Cassady
Total Acreage	130		Address	8200 No More Victims Road; Jefferson City, MO
Acreage w/in Perimeter	40			
Square Footage	750,000		Telephone:	573-751-3224
Year Opened	2004		Fax:	573-751-1277
Operational Capacity/Count (as of December 1, 2014)	1971 / 1966			
General Population Beds (capacity and count as of December 1, 2014)	1152 / 1152		Deputy Warden	Kelly Morriss – Offender Management
Segregation Beds (capacity and count as of December 1, 2014)	476 / 462		Deputy Warden	Donna Cayer – Operations
Treatment Beds (capacity and count as of December 1, 2014)	288 / 280		Asst. Warden	Billy Dunbar
Work Cadre Beds (capacity and count as of December 1, 2014)	0 / 0		Asst. Warden	
Diagnostic Beds (capacity and count as of December 1, 2014)	0 / 0		Major	Timothy Goebel
Protective Custody Beds (capacity and count as of December 1, 2014)	72 / 69			

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? *Good.*
- b. What capital improvement projects do you foresee at this facility over the next six years?
Security electronics, del-Norte fence system, sally port gate operators, hand scanners/card readers, laundry equipment, food service equipment, asphalt road repair, institutional lighting, ice builders, replacement of exterior lighting with new energy efficient lighting, and the painting (interior and exterior) of 750,000 gallon water tower.
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
Critical to the overall operation and energy efficiency.

2. Staffing:

- a. Do you have any critical staff shortages? *Yes, Cook II and Corrections Officer I.*
- b. What is your average vacancy rate for all staff and for custody staff only? *Our average vacancy rate is 19.32% with the bulk of this being our Corrections Officer I position which has a turnover rate of 21.30%.*
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution?
Yes.

- d. What is the process for assigning overtime to staff? *Primarily Volunteer.*
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? *Approximately 66% of comp time accrued is paid off; 34% is used*
- f. Is staff able to utilize accrued comp-time when they choose? *Not always, but to the extent possible.*

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? *An average of 70 offenders are typically enrolled in the HSE program (3.6% of our total offender population at JCCC). Currently 64 offenders are assigned due to the number of qualified applicants. NOTE: JCCC operates a volunteer education program that is in transition to the new HiSet standards. The education program at JCCC transitioned to a volunteer education program in 2005 when budget cuts re-directed funding to lower level facility education programs.*
- b. How many (and %) of inmate students earn their HSE each year in this institution? *Due to the change in our curriculum from the GED to the HiSet we have graduated 7 (10% of our students) offenders within this calendar year.*
- c. What are some of the problems faced by offenders who enroll in education programs? *Maintaining well qualified tutors has been a problem. The pay for offenders performing skilled positions in other jobs makes it difficult to recruit and maintain qualified education tutors which decreases the graduation rate. Many of the sets of books are incomplete. The tutors do their best to fill in the informational gaps with other related materials and resources. Many offenders are now being released from JCC but we do not have a funded Educational program meant to assist them in attaining their HiSet prior to release. The volunteer school although effective in its own right cannot meet the challenges that have developed since reclassifying JCCC as a level 2-5 institution.*

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have? *We have a therapeutic community for drug and alcohol abuse. Note: JCCC is operating a drug and alcohol program utilizing primarily volunteers. We have one drug counselor. We lost 10 staff to budget cuts in 2005.*
- b. How many beds are allocated to those programs? *288 beds.*
- c. How many offenders do those programs serve each year? *144 – 150 offenders*
- d. What percent of offenders successfully complete those programs? *20%*
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? *Shortage of qualified Volunteers in Corrections (VICs) and having the resources available to offender that have completed the programming who have been released from prison, including meeting and network opportunities, additional treatment options on the streets, as well as housing resources.*

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution? *None*
- b. How many offenders (and %) participate in these programs each year? *None*
- c. Do the programs lead to the award of a certificate? *N/A*
- d. Do you offer any training related to computer skills? *N/A*

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution? *Clothing Factory: custody officer pants, shirts and caps; offender gray pants and shirts; custom embroidery and custom cloth cutting*

*for other factories located at different institutions; ink jet printing on shirts, coats, blankets, utility belts and accessories along with various specialty items. **Graphic Arts:** printing for state of Missouri and tax exempt entities, examples are as follows: Property Tags for different divisions and agencies for the State of Missouri; Missouri Auto and Motorcycle Validation Tabs, Missouri Auto and Motorcycle Inspections stickers; License Plate decals for the State of Arkansas; Prints all flat license plates for the State of Missouri for the License Plate Factory, fleet vehicles, personalized, etc.; Prints all small city and county flat license plates and vanity license plates as well, handicap placards, parking permits, ATV permits, hanging parking permits for colleges and several state agencies, along with various specialty decals and stickers for state employees. **Furniture Factory:** desks, credenzas, hutches, bookcases, file cabinets, coat trees, trash receptacles, conference tables, and podiums (144 different items and designs). **Engraving Factory:** Engraves plaques/awards, name badges, ADA signs, wood carvings and picture frames as well as paintings, leather work, stained glass in the "Fine Arts" area. (The majority of this requires computer knowledge of drawing and layout programs). **Ink Cartridge Factory:** Rebuilds toner cartridges for printers, faxes and scanners. **License Plate Factory:** Makes all license plates for the State of Missouri, (Flat Plates and Embossed Plates). **Sign Shop:** Makes street and highway signs, banners, decals and placards.*

- b. How many (and %) of offenders work for MVE at this site? At this time we have 245 offenders employed within the MVE factories which are 12.25% of the total offender base count housed at the Jefferson City Correctional Center.*
- c. Who are the customers for those products? Missouri State Agencies, Tax Exempt Entities (i.e. Churches, Counties and Organizations), other State's Agencies and Missouri State Employees.*
- d. What skills are the offenders gaining to help them when released back to the community? The learn to get up and go to work, typing skills, computer skills, clerical skills, wood working skills (building furniture), printing skills (which requires attention to detail and extensive computer skills); Rotary and Laser Engraving skills (both of these require computer skills as well); Wood Carving; Sewing, Computerized Clothing Cutting, Light duty Maintenance, Manufacturing and Embroidery Skills as well as learning to work as a team and take directions from others. In each MVE factory we have a school section where they have the opportunity to learn Computer Literacy 101 which teaches them computer skills, typing, resume writing, tips on how to dress for interviews, how to create databases, work in Microsoft Windows, Word, Power Point, and how to create Equations and Formulas. Grades are received for each section they take and a certificate to verify they have completed the course. We also record with the Department of Labor the amount of hours of experience they have in their fields, whether it be clerical, drafting, machine operator or whatever area they are qualified for.*

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? Yes*
- b. How many offenders are seen in chronic care clinics? 1724*
- c. What are some examples of common medical conditions seen in the medical unit? Of our average population of 1970 offenders, we have 1724 that are enrolled in chronic care clinics. The chronically ill offenders are evaluated on a routine schedule ranging from one (1) to six (6) months based on the primary diagnosis of the patient. Patients can be evaluated on a more frequent basis, if their condition indicates the need. In addition to the established chronic care clinics, the facility has instituted and manages several specialty clinics (the chronic care figure noted above does not include the specialty clinics):*

- *Oral Surgery Clinic – We have been very fortunate to partnership with an oral surgeon who performs complex oral surgery procedures onsite approximately once per month.*
- *GI Studies Clinic – In 2012 we established the contracted services of a General Surgeon to perform endoscopy and colonoscopies onsite. These procedures are completed as an outpatient clinic.*
- *Cancer Center of Excellence – The facility infirmary has become a receiving and management center for male patients on chemotherapy and radiation therapy programs in the community.*
- *Telemedicine – We are expanding our partnership with several local providers who specialize in orthopedics, general surgery, oncology, nephrology, physical therapy, pain management through onsite telemedicine. The opportunity will provide a specialist consult and care via satellite to those offenders who present a need.*

d. What are you doing to provide health education to offenders? *Education is provided during all reception and orientation encounters. Complaint specific education is provided at the time of every clinical encounter: sick call, chronic care clinics, emergencies, specialty clinics, periodic physical assessments or any other time that a health care professional interacts with a patient to provide clinical care. This education is provided in written and/or verbal format. Additionally, the facility conducts an annual offender health fair during which many topics are discussed and handouts are provided concerning most chronic care conditions. Weekly group or individual education is provided for diabetic patients or those receiving Coumadin. Additional educational materials are available for review in the library.*

e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? *No, there have not been any active cases of TB at this institution. Each offender is tested annually either via Mantoux skin-test, or chest x-ray (in any case of a prior-positive) and the infirmary is equipped with two negative air flow rooms for any patient requiring respiratory isolation.*

f. Is the aging of the population affecting health care in prisons as it is affecting health care everywhere else? If yes, please explain: *Yes. The challenge of caring for the aging offender in the correctional setting is being recognized more each year. Long-term high-risk lifestyles, higher rates of underlying mental illness, and lack of preventative healthcare prior to incarceration all contribute to medical pathologies that can find inmates to be clinically, ten years older than their chronological age. Some examples are long term smoking and its relation to chronic obstructive pulmonary disease, affects on the vascular system, and associated carcinomas: untreated hypertension; uncontrolled diabetes and complications to vision and wound care; undiagnosed chronic active hepatitis B and C, undiagnosed or under-treated HIV infections, etc. Other problems arising from the aging process, with or without the chronic medical complications; decreasing ability to perform activities of daily living, higher incidents of confusion and dementia and decreasing mobility.*

In 2011, JCCC moved from a pilot site for an enhanced care unit (ECU) to a fully functioning ECU with established policies and has shared those trials and knowledge with other sites throughout Missouri. Full-time nursing staff is now assigned to the ECU, completing daily rounds and addressing any concerns the offenders may have. Monthly skin assessments are completed on wheelchair-bound offenders. Training is provided for Daily Living Assistants (DLA) through a grant provided via the Central Plains Geriatric Education Center (GED)/KUMC, who provides non-clinical assistance with activities of daily living. Additionally, an established hospice program is present where specially-trained offender volunteers provide companionship and comfort to patients receiving hospice and palliative

care within the Infirmary. As a result of an elderly offender program we have reduced the amount of hospital beds utilized in the community, and time spent in the infirmary. The offenders are assigned to a safe and secure environment where healthy lifestyles are supported and exercise and other socialization activities occur.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services? *Offender may access mental health services through the Health Services Referral (HSR) form and process. An offender may also be referred to mental health via a Staff Referral Form. Offenders may request to participate in group therapies verbally with mental health staff or by sending an HSR indicating a desire to participate.*
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? *There was one completed suicide in 2014 which is .0005% of the population. Suicide intervention training is provided at CORE Training an average of two times per month to JCCC staff by all licensed Qualified Mental Health Professionals and Institutional Chief of Mental Health Services at the facility. All employees are able to initiate suicide intervention policy and procedures.*
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? *There are 391 offenders taking psychotropic medications which are 19.97% of the population.*
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? *Of the offenders receiving psychotropic medications, 70 are rated as MH-4. Offenders with either MH-3 or MH-4 scores are scheduled for Chronic Care with Mental Health Therapists and Psychiatrists. By policy each is seen by the Mental Health Therapist a minimum of once each 30 days and by the psychiatrist a minimum of once each 90 days. Each MH-3 or MH-4 offender participates in developing an Individualized Treatment Plan with input from the multidisciplinary treatment team. Currently 40 offenders participate in the "SSRU" Secure Social Rehabilitation Unit. These offenders are all MH-4. It was envisioned and designed to provide clinically appropriate mental health treatment and programming to high custody level offenders who experience serious mental illness. It was determined that there were a number of seriously mentally ill offenders housed in the segregation units as a result of their behaviors primarily associated with their particular mental illness. The SSRU establishes a setting where treatment and programming is provided with the goal of moving these offenders to a more appropriate and less restrictive environment. This move to a less restrictive environment is managed on a level system which negotiates a continuum from segregation type placement on one end to a return to general population placement on the other. This level system allows movement in either direction individually determined by each particular offender's progress in the programming, his behavior and his particular needs. Offenders with a MH score of MH-1 or MH-2 are seen by therapist via the HSR process. All offenders are welcome to participate in mental health therapeutic group therapies.*
9. What is your greatest challenge in managing this institution? *Our facility is now 10 years old. A lot of our equipment that was brand new in 2004 is now aged and in need of repair. This coupled with a decreasing budget is an area of concern. A big part of our programs and educational opportunities provided to the offenders operate with Volunteers in Corrections since positions were lost in 2005 due to budgetary concerns. At times it is challenging to find qualified citizens to volunteer their time to work in a prison setting. We have been very fortunate thus far.*

10. What is your greatest asset to assist you in managing this institution? *JCCC has the largest industrial industry in the state which provides a lot of good jobs that keep the offenders busy. Keeping this in mind this gives incentive for offenders to display good behavior along with the benefits of providing employable skills to these offenders upon their release. Our staff has been innovated with keeping up on programs and Restorative Justice projects that are meaningful and have proven success within our system.*

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) *Aging but well maintained. In 2014 we received a new minivan and have added the wheelchair conversion kit to a van purchased in 2013.*

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)** *Morale is medium. The staff at JCCC have a great work ethic and work well together with minimal staff conflict. They are very proud of working at JCCC due to the numerous offender rehabilitative programs, substantive offender jobs, challenging work environment and experienced personnel. Our staff are greatly involved in many extracurricular fund raising endeavors bringing them closer together with a sense of pride for our community service. This has been proved by numerous staff members receiving awards and recognition. We are losing a large number of staff to better paying jobs. This is affecting morale by the loss of seasoned and experienced staff.*

13. Case Managers:

- A. How many case managers are assigned to this institution? *20*
- B. Do you currently have any case managers vacancies? *none*
- C. Do the case managers accumulate comp-time? *no*
- D. Do the case managers at this institution work alternative schedules? *Yes, (1) Restorative Justice Casemanager.*
- E. How do inmates gain access to meet with case managers? *Open door, Inmate to staff correspondence and case managers making rounds in the units.*
- F. Average caseload size per case manager? *140*
 - # of disciplinary hearings per month? *303*
 - # of IRR's and grievances per month? *175 IRR's and 116 grievances*
 - # of transfers written per month? *41*
 - # of re-classification analysis (RCA's) per month? *183*
- G. Are there any services that you believe case managers should be providing, but are not? *providing? No*
- H. If so, what are the barriers that prevent case managers from delivering these services? *None*
- I. What type of inmate programs/classes are the case managers at this institution involved in? *Secure Social Rehabilitation Unit, Impact on Crime Victims Classes, Puppies for Parole, Anger Management, Inside Out Dads, Pathways to Change, Hospice and Enhanced Care Unit.*
- J. What other duties are assigned to case managers at this institution? *Restorative Justice, Employability Skills and Life Skills.*

14. Institutional Probation and Parole officers:

- A. How many parole officers are assigned to this institution? *2 Probation and Parole Officers are assigned to the JCCC Probation and Parole Office.*
- B. Do you currently have any staff shortages? *While we do not have an officer shortage, our Office Support Assistant position will be vacant by January 1, 2015. We are taking steps to fill that position at this time.*

- C. Do the parole officers accumulate comp-time? *No, we take steps to avoid the accumulation of compensatory time.*
- D. Do the parole officers at this institution flex their time, work alternative schedules? *The officers flex their time as needed. The officers do not work alternative work schedules at this time.*
- E. How do inmates gain access to meet with parole officers? *Offenders may request via letter and via staff request.*
- F. Average caseload size per parole officer? *The first officer is assigned the offenders with DOC numbers ending with 0-4. The second officer is assigned the offenders with DOC numbers ending with 5-9.*
 - # of pre-parole hearing reports per month? *20-30 pre-parole hearings are completed each month.*
 - # of community placement reports per month? *5-6 reports are generated per month.*
 - # of investigation requests per month? *The number of investigation reports varies per month based on the number of scheduled parole/conditional releases; however, on average there is approximately 10-14 reports generated per month.*
- G. Are there any services that you believe parole officers should be providing, but are not providing? *No, not at this time.*
- H. If so, what are the barriers that prevent officers from delivering these services? *N/A*
- I. What type of inmate programs/classes are the parole officers at this institution involved in? *The officers are involved in the Offenders Offering Alternatives (OOA) tour multiple times per month.*

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. *None*

16. Does your institution have saturation housing? If so, how many beds? *N/A*

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? *500 radio*
- b. Do you have an adequate supply of batteries with a good life expectancy? *yes*
- c. Are the conditioners/rechargers in good working order? *We have 2 conditioners in good working order, this is down from 6 with 4 that are in the process of being repaired.*

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Maryville Treatment Center			
Custody Level	Minimum	Warden	Sonny Collins
Total Acreage	39 acres	Address	30227 US Hwy 136
Acreage w/in Perimeter	12 acres		Maryville MO 64468
Square Footage	137,000	Telephone:	(660) 582-6542
Year Opened	1996	Fax:	(660) 582-8071
Operational Capacity/Count (as of Nov 30, 2014)	561/540		
General Population Beds (capacity and count)	36/34	Deputy Warden	Teresa Shirrell Operations
Segregation Beds (capacity and count)	32/23	Deputy Warden	Gaye Colborn Offender Management
Treatment Beds (capacity and count)	525/506	Asst. Supt	N/A
Work Cadre Beds (capacity count)	0	Asst. Supt	N/A
Diagnostic Beds (capacity and count)	0	Major	Dusty Jones
Protective Custody Beds (capacity and count)	0		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? **Good**
- b. What capital improvement projects do you foresee at this facility over the next six years?
 - 1. **Replace perimeter detection system, along with locks in Control Center**
 - 2. **Replace steam loop in Bldg 3**
 - 3. **Replace windows in Bldgs 2 & 3**
 - 4. **Tuck Point Bldgs 3, 4 & 5**
 - 5. **Update Bldg 2 cooling system**
 - 6. **Replace flooring in Bldg 2**
 - 7. **Upgrade showers in Bldgs 2 & 3 – C-side**
 - 8. **Replace all vehicles above 100,000 miles with more efficient types**
 - 9. **Inspection of water tower – repaint inside and out**
 - 10. **Repave all parking lots**
 - 11. **Build a warehouse for maintenance tools and inventory**
- c. How critical do you believe those projects are to the long-term sustainability of this facility? **The perimeter detection system has exceeded its life expectancy and has lost factory support. The windows in Bldg 2 & 3 and the tuck pointing are very critical and are in need of immediate repair.**

2. Staffing:

- a. Do you have any critical staff shortages? **COI, COII & STKI**
- b. What is your average vacancy rate for all staff (**5.58**) and for custody staff only? (**3.75**)
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? **No**
- d. What is the process for assigning overtime to staff? **Volunteer basis and then mandatory overtime list.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 68% of comp time accrued is paid off; 32% is used.**
- f. Is staff able to utilize accrued comp-time when they choose? **Yes, but subject to shift coverage.**

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? **103 offenders enrolled in education. At least 19% of offender students are currently enrolled.**
- b. How many (and %) of inmate students earn their HSE each year in this institution? **Approximately 70, and about 20% receive their HSE.**
- c. What are some of the problems faced by offenders who enroll in education programs? **Distracted by the number of offender students in our area, it seems crowded sometimes.**

At this time, we are not able to completely cater to those with special learning needs. We do what is required, but not always what they would like.

4. Substance Abuse Services:

a. What substance abuse treatment or education programs does this institution have?

The Maryville Treatment Center program has been developed in collaboration with Gateway Foundation, and certified in conformance with ADA standards for Institutional Treatment Centers, as well as Missouri Department of Corrections policies and procedures. Our model for treating addictive disorders in a therapeutic community is based on the foundational concepts of George DeLeon and others in the TC field, and reflected in the *Revised Therapeutic Communities of America Standards for TC's in Correctional Settings*, Office of National Drug Control Policy.

The Maryville Treatment Center is solely dedicated to providing alcohol and drug treatment in a modified therapeutic community (TC) Model, integrated with Missouri Re-Entry Process (transitional) services. Our program provides clients with intermediate and long-term, intensive treatment of substance use disorders in a structured, therapeutic learning environment.

Treatment consists of a four-week orientation to Therapeutic Community, followed by Intensive Addictions Treatment and Re-Entry Skills training. As part of our commitment to the DOC Missouri Re-Entry Process, Maryville Treatment Center also incorporates classes previously given in Transitional Housing Units as well as Medical and Mental Health treatment/classes in our residential treatment program. This includes Pathway-To-Change and the DAI curriculum for Anger Management. This past year saw the addition of co-occurring disorders educational programming and the enhancement of our Criminal Thinking curriculum.

Blended Model of State-Private Services

The Maryville Treatment Center program offers a unique service model in which State Department of Corrections, Division of Offender Rehabilitative Services (DORS) clinical staff are blended with clinical staff from Gateway Foundation, a private provider of treatment services, in a seamless and efficient delivery of programming. This teamwork occurs in a larger context of collaboration with DOC's Division of Adult Institutions (DAI) sections of MTC staff, since the concept of therapeutic community views all facility staff as part of an extended treatment team involved in the client's recovery.

b. How many beds are allocated to those programs?

We have approximately 445 offenders here for six-months and 80 for one year. As of November 21, 2012, one-year beds increased by up to 120 offenders court-ordered into Long-Term treatment beds, resulting in a ratio of 200 participants in one-year treatment programming and 325 participants in 6-month treatment programming.

c. How many offenders do those programs serve each year?

We serve approximately 1000 offenders per year (445 x 2 plus 80)

d. What percent of offenders successfully complete those programs?

Completion Summary 01/01/2014 – 11/30/2014			
		Total	%
Total Successful Completions		772	93.8%
Terminated as Unsuccessful *		51	6.2%
Total Clients Served to Date in 2014		837	100%

*Cardinal Rule violations or lack of Therapeutic gain.

During the time period from 01/01/2013 through 11/30/2013, we had 772 successful completions and 89 program terminations due to an inability to benefit from treatment. Fifty-eight offenders were administratively transferred for various reasons of ineligibility, or voluntarily withdrew. These rates are consistent with similar treatment programs.

e. **What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?**

The primary challenge is staffing. The location of most prison sites sets them apart from population centers and any type of significant pool of qualified candidates for treatment staff. Additionally, treatment providers and DORS often vie for the same few candidates.

Other challenges come from adjusting treatment programming to work within institutional procedures, and the on-going shortage of available space for all the institutions competing services.

5. Vocational Programs: NOT APPLICABLE

- a. What types of vocational education programs are offered at this institution?
- b. How many offenders (and %) participate in these programs each year?
- c. Do the programs lead to the award of a certificate?
- d. Do you offer any training related to computer skills?

6. Missouri Vocational Enterprises: NOT APPLICABLE

- a. What products are manufactured at this institution?
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes.**
- b. How many offenders are seen in chronic care clinics? **204.**
- c. What are some examples of common medical conditions seen in the medical unit? **Complaints of headache, athlete's foot, common cold, back pain and toothache are the most common health complaints seen.**
- d. What are you doing to provide health education to offenders? **We have a yearly health fair; we give handouts for each sick call encounter; we supply pamphlets in the waiting area of the medical unit and health pamphlets are available in the resource room.**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? **No.** If so, how
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? **Yes.** If yes, please explain. **As the prison population ages, there are more critical health concerns seen. The offender may not have taken care of their medical needs, either because of substance abuse issues or lack of funds to pay for health care. Often the prison system is the first or only exposure the offender has had to health care.**

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services? **Offenders can access mental health services via submission of an HSR, staff referral, signing up for groups, through the course of conducting segregation rounds and in the event of a crisis, staff can phone mental health staff to determine the appropriate course of action to expedite services.**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **There have been no successful suicides at MTC in the past 12 months.** We are conducting routine Suicide Prevention training with staff during CORE training. Regular and proactive mental health services also attempts to aid in identifying individuals that may be experiencing thoughts of self-harm and try to serve those individuals as they are identified. Mental Health also participates in the annual Health Fair to provide information to the offender population.
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **MTC has 43 MH-3 offenders. 41 (7% of the population) of those are prescribed psychotropic medications for mental health reasons (by the psychiatrist).**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? **In order for an offender to receive psychotropic medications, they must be seen by the psychiatrist and diagnosed as having a Severe Mental Illness (SMI). These offenders are enrolled in the Mental Health Chronic Care Clinic (MHCCC) and are seen by the ICMHS at least one time monthly and by the psychiatrist at least once every 90 days (sometimes more often than that if clinically indicated). Offenders whose symptoms significantly impair their normal daily functioning sometimes have difficulty functioning in a general population environment. In such cases, the Mental Health score may be raised to MH-4, which would in turn necessitate that the offender be transferred to**

another institution to better meet their mental health treatment needs (as we typically do not serve MH-4 offenders at MTC). As a general rule, the level of service we provide at MTC (individual contacts, group, educational materials, psychiatric consultation, staff consultation, etc.) seems to adequately meet the needs of our offender population and the institution itself.

9. What is your greatest challenge in managing this institution? **Maintaining critical staffing levels is our greatest challenge. It makes it difficult to give staff time off due to call-ins, training, FMLA and Seniority Based Leave. A great deal of comp time is being accumulated due to mandatory staffing. Another challenge is maintaining an effective and efficient operation with less. The pay for Cooks continues to be a problem when it comes to hiring and retaining them.**
10. What is your greatest asset to assist you in managing this institution? **The staff that are willing to go the extra mile and do the best they can with the tools they are given. It is always good to have the support of upper management as we do more with less.**
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) The fleet and its conditions are as follows.

License #	Year	Make/Model	Mileage	Condition
13-0120M	1999	DODGE VAN	88011	Fair
13-0269M	1996	DODGE UTILITY 4WD	47102	Fair
13-0270M	1997	FORD TRUCK OT	49135	Fair
13-0272M	2006	DODGE MINI VAN	153934	Fair
13-0274M	2006	DODGE MINI VAN	160991	Fair
13-0277M	2014	FORD VAN 15 PASSENGER	20134	Good
13-0281M	1996	JEEP UTILITY 4WD	95801	Very Poor
13-0282M	1996	DODGE UTILITY 4WD	52072	Fair
13-0286M	1992	CHEVY UTILITY 4WD	80955	Poor
13-0287M	1998	FORD TRUCK OT	15578	Fair
13-0339M	2007	FORD SEDAN	96398	Good
13-0393M	1987	C-50 TRUCK	40774	Fair
13-0395M	2006	FORD VAN 15 PASSENGER	100784	Good
13-0509M	2002	FORD SEDAN	142274	Fair
13-0439M	2006	FORD VAN 15-PASSENGER	77659	Good
13-0781M	2003	FORD SEDAN	114971	Fair
32-0227M	2008	CHEVY SEDAN	111462	Good
32-0263M	2008	CHEVY MINI VAN	144208	Good
13-0331M	2012	FORD VAN 15-PASSENGER	120818	Good

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer) The morale of Custody staff at Maryville Treatment Center is assessed overall as medium. During 2014, MTC received a new Chief of Custody and is currently handling the change in management style and philosophy well. A marked reduction in employee grievances and requests for informal resolutions has been noted. An increase in staff feedback on operations is a positive indicator that they are taking ownership in their positions and the institution.**

13. Case Managers:

- a. How many case managers are assigned to this institution? **5**
- b. Do you currently have any case manager vacancies? **No**
- c. Do the case managers accumulate comp-time? **Minimal**
- d. Do the case managers at this institution work alternative schedules? **Only as needed**
- e. How do inmates gain access to meet with case managers? **Offenders submit a line of communication form to classification staff.**
- f. Average caseload size per caseworker? **112**
 - # of disciplinary hearings per month? **109**
 - # of IRR's and grievances per month? **13 IRRs and 6 grievances**
 - # of transfers written per month? **14**
 - # of re-classification analysis (RCA's) per month? **48**
- g. Are there any services that you believe caseworkers should be providing, but are not providing? **No.**

- h. If so, what are the barriers that prevent case managers from delivering these services? **N/A**
- i. What type of inmate programs/classes are the case managers at this institution involved in? **Case Managers facilitate Pathways to Change, Impact of Crime on Victim Classes, InsideOut Dads and Anger Management. They are actively involved in the various aspects of the Missouri Reentry Process, as well as assist with providing treatment/substance abuse services.**
- j. What other duties are assigned to case managers at this institution? **Other additional duties include Visiting Liaison, Required Activities Coordinator, Program Tracking, Assistant Work Release Coordinator and Restorative Justice Coordinator. Case Managers complete the Transition Accountability Plans and Adult Internal Risk Assessment with offenders, along with the regular duties in classification (ie, all disciplinary, classifying offenders, visitation, offender questions and issues, etc).**

14. Institutional Probation and Parole officers:

- a. How many parole officers are assigned to this institution? **4**
- b. Do you currently have any staff shortages? **No**
- c. Do the parole officers accumulate comp-time? **Minimal**
- d. Do the parole officers at this institution flex their time, work alternative schedules? **As needed**
- e. How do inmates gain access to meet with parole officers? **Schedule Appointment/utilize Line of Communication**
- f. Average caseload size per parole officer? **Population divided by 4 officers currently**
 - # of pre-parole hearing reports per month? **6**
 - # of community placement reports per month? **76**
 - # of investigation requests per month? **81**
- g. Are there any services that you believe parole officers should be providing, but are not providing? **No**
- h. If so, what are the barriers that prevent officers from delivering these services? **N/A**
- i. What type of inmate programs/classes are the parole officers at this institution involved in? **None presently.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **The number one issue is the need for more FTEs since we run at minimum staffing more often than not. The need for replacement windows in Bldgs. 2 & 3 is still an issue. Another concern is the safety with the windows in Bldg 3 being single pane. This also affects the efficiency when heating the building. This type of window in both buildings makes it very difficult to control the heating and cooling which can be very costly.**

16. Does your institution have saturation housing? If so, how many beds? **Yes; 36**

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? **120**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes**
- c. Are the conditioners/rechargers in good working order? **All battery chargers and conditioners are fully functional and meet current needs.**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Missouri Eastern Correctional Center				
Custody Level	Medium/Minimum		Warden	Jennifer Sachse
Total Acreage	250		Address	18701 Old Highway 66
Acreage w/in Perimeter	40			Pacific, MO 63069-3526
Square Footage	247884		Telephone:	(636) 257-3322
Year Opened	1981		Fax:	(636) 257-5296
Operational Capacity/Count (as of December 1, 2014)	1100/1089			
General Population Beds (capacity and count as of December 1, 2014)	1024/984		Deputy Warden	Brenda Short
Segregation Beds (capacity and count as of December 1, 2014)	100/105		Deputy Warden	George Hayes
Treatment Beds (capacity and count as of December 1, 2014)	0		Asst. Warden	John Hilpert
Work Cadre Beds (capacity and count as of December 1, 2014)	0		Asst. Warden	
Diagnostic Beds (capacity and count as of December 1, 2014)	0		Major	Samuel Billingsley
Protective Custody Beds (capacity and count as of December 1, 2014)	0			

1. Capital Improvement Needs:

- How would you rate the overall condition of the physical plant of the institution? **Fair.**
MECC is over thirty (30) years old. Many of the systems are original and are way beyond their life expectancy.
- What capital improvement projects do you foresee at this facility over the next six years?
Replacement of our boilers and generators. The kitchen floor continues to deteriorate and must be replaced. Our heating and cooling systems are aged and could be more energy efficient. Our locking systems are original and showing signs of wear. The perimeter road and parking lot have been patched but require immediate attention. The water treatment plant building has deteriorated and needs to be repaired. Additionally, the walk ways inside the perimeter are cracked, deteriorating and need to be replaced.
- How critical do you believe those projects are to the long-term sustainability of this facility?
All are critical for long-term sustainability.

2. Staffing:

- Do you have any critical staff shortages? **Not at this time.**

- b. What is your average vacancy rate for all staff and for custody staff only? **All staff= 2 per month, Custody staff = 5 per month**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? **Due to limited funding for comp-time payouts, we must closely monitor and manage all comp time that is earned. It is a very tedious and time consuming task for supervisors.**
- d. What is the process for assigning overtime to staff? **First we request volunteers, then, if necessary, we select a name from the overtime list.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 56% of comp time accrued is paid off; 44% is used.**
- f. Is staff able to utilize accrued comp-time when they choose? **Yes, at times.**

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? **281 Students enrolled; 105 on the waiting list; 73% enrolled.**
- b. How many (and %) of inmate students earn their HSE each year in this institution? **75 HSE certificates; 88% pass rate.**
- c. What are some of the problems faced by offenders who enroll in education programs? **In that HSE education is a mandatory program, some students are not motivated to achieve. They rebel against the mandatory attendance. Those students who are motivated move quickly and achieve progress. In that this institution houses offenders that have a short period of time to achieve their HSE due to being paroled, or transferred for other reasons.**

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have? **Living in Balance is a 60 hour, 24 session educational program that focuses on the effects drug involvement has behaviorally and cognitively on lives and the changes needed to become competent productive citizens in society upon release.**
- b. How many beds are allocated to those programs? **0**
- c. How many offenders do those programs serve each year? **168**
- d. What percent of offenders successfully complete those programs? **96.5%**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?
Offenders being allowed to drop out without consequences.
Offenders being transferred before getting in the class or while enrolled.
Not offering an evening program for the offenders on outside clearance or involved in other day time classes.
Offenders needing to leave class to go to property issue, case manager meetings, canteen pick-up.
Offenders have a difficult time accessing me in times of crisis or when they need counseling services.

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution? **Professional Gardening.**
- b. How many offenders (and %) participate in these programs each year? **50 students; 180 on waiting list; 22% enrolled.**
- c. Do the programs lead to the award of a certificate? **Yes, Department of Labor certificate- Landscape Technician.**

- d. Do you offer any training related to computer skills? **Yes, the program utilizes the Pro Design Landscape software which is a computer aided drafting program with 3-D imaging.**
- 6. Missouri Vocational Enterprises: **MECC no longer has any MVE projects.**
 - a. What products are manufactured at this institution?
 - b. How many (and %) of offenders work for MVE at this site?
 - c. Who are the customers for those products?
 - d. What skills are the offenders gaining to help them when released back to the community?
- 7. Medical Health Services:
 - a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes, we are accredited.**
 - b. How many offenders are seen in chronic care clinics? **There are approximately 700 chronic care clinics; however a good number of offenders are in more than one clinic.** What are some examples of common medical conditions seen in the medical unit? **Hypertension, Diabetes, Asthma, Allergies, Heart Disease, Hepatitis C, Pain complaints, etc.**
 - c. What are you doing to provide health education to offenders? **Education is provided with each visit to medical via the nurse, chronic care nurse, physician, dentist, etc. We provide educational material to read while in medical, at R/O orientation and we have an annual health fair.**
 - d. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **No**
 - e. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain **There has been a slow uptick of chronic care problems in general. Our population at MECC does not have an infirmary so the age range of our population is generally a little younger than other facilities. As those who are older do age there can be an increase of healthcare costs associated with chronic diseases that are more prevalent due to unhealthy lifestyles.**
- 8. Mental Health Services:
 - a. How do offenders go about obtaining mental health treatment services? **Offenders are informed how they may access mental health services through the offender handbook, during their initial reception by caseworkers and medical staff upon arriving to MECC by forwarding a Health Services Request (HSR) and these requests are triaged and scheduled with MH staff. Many offenders are also referred by Custody, Medical Staff, and or Education staff when it is noticed someone may by having some particular issues in general population or segregation. Finally, any offender may simply just self-declare by just showing up to the medical department if they have an emergent or urgent problem.**
 - b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **In 2014 we had no completed suicides here at MECC. All staff is trained to look for signs of behavioral changes in offenders. Mental Health staff meets at least once per month with all offenders that are MH3's. These meetings may also occur with the MH-RN and/or the Psychiatrist. Also, segregation rounds are conducted weekly to head off any problems that offenders may start having being isolated. The MH department also provides MH groups to all offenders regardless of their MH score if they request to sign up for them. Overall, all staff here at MECC try to prevent**

suicide attempts by getting to know each offender and the types of behaviors they exhibit each day.

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **Currently, 17% of the offenders at MECC are prescribed psychotropic medications.**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? **Effective this day we have 199 offenders (18%) on the Mental Health caseload here at MECC. We provide Individual and Group Counseling services, MH Nursing services and Psychiatry services. The MH department serves those offenders in crisis and anyone that is referred to us for assessment.**

9. What is your greatest challenge in managing this institution? **Lack of available funds to replace deteriorating equipment and repairs of a 30+ year old facility; turnover of staff to higher paying jobs.**

10. What is your greatest asset to assist you in managing this institution? **Tenured, dedicated staff and administrative team.**

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) **We currently have 2 vehicles with over 200,000 miles, 4 vehicles with mileage between 150,000 and 200, 000, 11 vehicles with mileages from 100,000 to 150,000 miles. Our oldest vehicle is a 1994 pickup truck that is primarily use on site/ our oldest offender transportation vehicle is a 1996 Dodge van with 148,159 miles.**

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer) For the most part, the morale at MECC is average, but close to being high, and recently we had a few new staff promoted including the Chief of Custody (Major).**

13. **Case Managers:**

- A. How many case managers are assigned to this institution? **16**
- B. Do you currently have any case managers vacancies? **None**
- C. Do the case managers accumulate comp-time? **No**
- D. Do the case managers at this institution work alternative schedules? **Yes**
- E. How do inmates gain access to meet with case managers? **Through office hours, case management meetings, letters, and wing representative meetings.**
- F. Average caseload size per case manager? **85**
 - # of disciplinary hearings per month? **50**
 - # of IRR's and grievances per month? **8**
 - # of transfers written per month? **8**
 - # of re-classification analysis (RCA's) per month? **20**
- G. If so, what are the barriers that prevent case managers from delivering these services? **N/A**
- H. What type of inmate programs/classes are the case managers at this institution involved in? **ICVC, Pathway to Change, Inside Out Dads, Anger Management, Beat the Streets, Commitment to Change, Father Support, Life after Release, Living on the outside, Alcohol Anonymous and Speaking Circles.**

I. What other duties are assigned to case managers at this institution? **R&O process, Puppies for Parole, Outside Clearance, Restorative Justice, Grievance Officer, PREA, MULES, Facilitate Programs, 4-H Life, Birth Certificates, Social Security Cards, CERT Members, facilitate in service training, Medicaid, State Identification Cards, Free Application for Federal Student Aid, Vocational Training Application, Case Management Meetings, Mentor, Assist with Home Plans, Assist Legal Issues, Access to Employment Information, Evidence Based Inquiries, MDOT Assessment and Payroll, Outside Clearance Applications, Visiting Applications, Job Assignments, Transitional Assistance Program, Administration Segregation Hearings, Grievances, Restorative Justice, Green Check/Account Issues, Assist with Property for Administrative Segregation Placement, Acting Functional Unit Manager capacity, Investigations, Housing Unit Inspections, Institutional Inspections, Institutional Tours, Interview Boards, etc.**

14. **Institutional Probation and Parole officers:**

- A. How many parole officers are assigned to this institution? **Six**
- B. Do you currently have any staff shortages? **No**
- C. Do the parole officers accumulate comp-time? **No**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **Yes**
- E. How do inmates gain access to meet with parole officers? **Office hours, Notes**
- F. Average caseload size per parole officer? **One housing Unit**
 - # of pre-parole hearing reports per month? **10 per Officer**
 - # of community placement reports per month? **4 per Officer**
 - # of investigation requests per month? **12 per Officer**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **P&P Orientation Class**
- H. If so, what are the barriers that prevent officers from delivering these services? **Work load**
- I. What type of inmate programs/classes are the parole officers at this institution involved in? **OOA- Offenders Offering Alternatives, Pre-Release Class, Father's Support Re-Entry Grant**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **N/A**

16. Does your institution have saturation housing? If so, how many beds? **MECC does not have saturation housing.**

17. **Radio/Battery Needs:**

- a. What is the number of radios in working condition? **275 radios to be issued from the issue room, there are 96 radios permanently issued to staff members.**
- b. Do you have an adequate supply of batteries with a good life expectancy? **Yes, we have 145 batteries in the issue room. The white Nimh batteries are losing life daily, as they are only good for 365 charges.**
- c. Are the conditioners/rechargers in good working order? **For the most part, yes. We have 3 re-chargers that need to be repaired which are single battery holders. Two of our blue re-chargers need to be looked at due to bad power connections.**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Moberly Correctional Center				
Custody Level	C-1 & C-2		Warden	Dean Minor
Total Acreage	232		Address	5201 S. Morley
Acreage w/in Perimeter	80			Moberly, MO 65270
Square Footage	520,576		Telephone:	660-263-3778
Year Opened	1963		Fax:	660-263-8206
Operational Capacity/Count (as of December 1,2014)	Capacity-1,800 Count-1784			
General Population Beds (capacity and count as of December 1, 2014)	Capacity-1,264 Count-1,247		Deputy Warden	Teresa Thornburg, Offender Management
Segregation Beds (capacity and count as of December 1, 2014)	Capacity-214 Count-139		Deputy Warden	Lisa D. Pogue, Operations
Treatment Beds (capacity and count as of December 1, 2014)	Capacity-132 Count-131		Asst. Warden	Dennis M. Allen
Work Cadre Beds (capacity and count as of December 1, 2014)	Capacity-1,528 Count-1,145		Asst. Warden	
Diagnostic Beds (capacity and count as of December 20, 2013)	Capacity-114 Count-111		Major	Steven Simmons
Protective Custody Beds (capacity and count as of December 1,2014)	Capacity-158 Count-156			

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

Good

b. What capital improvement projects do you foresee at this facility over the next six years?

- Replace dilapidated high temperature water lines in Administration Building heating and air conditioning system. This includes required asbestos abatement on insulation on the piping joints.
- Remove sludge from lagoon cells.
- Repair/Replace kitchen floor in Food Service.
- Replace aged high temperature water lines utilized throughout the institution for heat and hot water systems.
- Resurface perimeter roads and parking lots.

c. How critical do you believe those projects are to the long-term sustainability of this facility?

The aged piping on the heating systems and high pressure system are critical as they are becoming unreliable and are critical systems to operations. The asbestos situation is a critical

safety issue. It is becoming increasingly difficult to maintain discharge and water standards on our lagoon system. The kitchen floor is a critical safety and sanitation concern.

2. Staffing:

a. Do you have any critical staff shortages?

No critical shortages

b. What is your average vacancy rate for all staff and for custody staff only?

Custody: 1.8%

Non-Custody: 1.4%

Overall: 1.7%

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

Yes, a consistent effort is made to eliminate the accumulation of comp time.

d. What is the process for assigning overtime to staff?

We utilize a voluntary overtime list. We try to achieve consistency when assigning overtime; however, some posts require more overtime (i.e. Transportation Officers). This is due to court out counts, medical appointments, and emergency medical outcounts. It is difficult to impossible to accurately predict staffing needs in all situations. When it is necessary to mandate overtime, we utilize a seniority based system.

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

Approximately 57% of comp time accrued is paid off; 43% is used.

f. Is staff able to utilize accrued comp-time when they choose?

We consistently make an effort to flex comp time to reduce accrual and aid in managing our workforce. Efforts are made to work with employees to grant the usage of comp time at a mutually convenient time for supervisors and employees.

3. Education Services:

a. How many (and %) of inmate students at this institution are currently enrolled in school?

Approximately 436 of the 469 available and eligible offenders are enrolled or 93%.

b. How many (and %) of inmate students earn their HSE each year in this institution?

Approximately 93 for calendar year 2014 or 21% of inmate students.

c. What are some of the problems faced by offenders who enroll in education programs?

- Attitude – Many offenders have failed in school while on the streets and need to find success in order to advance and work up to their ability.
- Many offenders have been labeled as “learning disabled” and believe they cannot learn.
- Poor communication skills.

4. Substance Abuse Services:

a. What substance abuse treatment or education programs does this institution have?

- Relationship
- Lifestyles & Values
- Relapse, Recovery and Recidivism

- Commitment to Change
- Commitment to Change II
- Commitment to Change III
- Basic Relapse Prevention
- Living in Balance (Basic Substance Abuse Education)
- Good Intentions, Bad Choices
- Anger Management
- Free Your Mind

b. How many beds are allocated to those programs?

Not applicable, as participation is not linked to beds.

c. How many offenders do those programs serve each year?

600-800

d. What percent of offenders successfully complete those programs?

Approximately 70%; there were more successful completions this year due to not as many transfers, however we still lose others to parole releases, going to disciplinary segregation, and no shows.

e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

- Denial of a problem
- Lack of responsibility (showing up for class on time & successfully completing)
- Attitude towards making positive change
- Thinking they will start on recovery when they reach the streets
- Not wanting to ask for help
- No positive support (family or friends)
- Not willing to attend support groups (NA/AA/Celebrate Recovery)

5. Vocational Programs:

a. What types of vocational education programs are offered at this institution?

Currently MCC offers a welding course which allows for apprenticeship with the Department of Labor and a letter of completion from the Department of Corrections, as well as hands-on-training with welding equipment. The course is also accredited through the National Center for Construction Education and Research (NCCER) with the students receiving a certification through NCCER. This accreditation is awarded by module, so if a student is unable to complete the program they still receive credit for modules completed on NCCER's national database which potential employers can access.

b. How many offenders (and %) participate in these programs each year?

Approximately 36 offenders participate in these programs per year.

c. Do the programs lead to the award of a certificate?

All offenders completing the class receive a letter of completion, a Department of Labor Apprenticeship certificate, and a certificate from National Center for Construction Education and Research, which includes an ID card and registration number so employers can verify training.

d. Do you offer any training related to computer skills?

All CTE classes utilize technology in some manner, as well as some usage of the computer. For the welding program, computer skills utilized would be based upon reinforcement of lesson information and basic business skills. This includes email etiquette, how computers operate, and basic knowledge of hardware and software. Training is also provided on how computers have changed the construction and welding industries.

6. Missouri Vocational Enterprises:

a. What products are manufactured at this institution?

- Audio Visual Cart
- BBQ Grills
- Beds
- File Cabinets
- Foot Lockers
- Gym Lockers
- Hitch Plugs
- License Plate Holders
- Mobile Carts
- Park Benches
- Park Chairs
- Picnic Tables
- Rolling File Cabinets
- School Chairs
- School Desks
- School Lockers
- Shelving Units
- Shepherd Hooks
- Slim Line Cabinets
- Student Desks, ADA
- Tables
- Trash Receptacles
- Utility Lockers
- 4-Color Printing of State Forms, Envelopes, and Publications
- Laundry Services for the Institution along with the University of Missouri Hospitals, Residence Halls, and Jefferson City Hospital.
- Specialty items are made upon request

b. How many (and %) of offenders work for MVE at this site?

MVE employs 288 or 16% of capable offender workers at MCC.

c. Who are the customers for those products?

Any tax-supported entity (state, city, county, and federal) not-for-profit organizations and state employees.

d. What skills are the offenders gaining to help them when released back to the community?

Offenders working for MVE at MCC learn skills that are transferrable to manufacturing and many other types of businesses. Many of the offenders at MCC are registered with the U. S. Department of Labor Apprentice Program in a variety of skilled areas including, but not limited to:

- Bindery Machine Operator
- Coating, Painting, and Spraying Machine Setter
- Combination Machine Tool Setter and Operator
- Computer Operator
- Industrial Machinery Mechanic
- Laundry Machine Operator
- Material Inspector
- Mechanical Drafter
- Press and Press Brake Machine Setter
- Printing Press Machine Operator
- Production Laborer
- Production, Planning, and Expediting Clerk
- Welder
- Work Ethics and Job Responsibility
- Necessary Skills to Survive After Release

7. Medical Health Services:

a. Is the facility accredited by the National Commission on Correctional Health Care?

Yes

b. How many offenders are seen in chronic care clinics?

The chronic care clinics number of offenders is as shown below and some of the patients are enrolled in more than one clinic:

- Cardiovascular: 433
- Pulmonary: 64
- Infectious Disease: 2
- Diabetes: 69
- Internal Medicine: 54
- Seizures: 80
- Infectious Disease Non-TB: 30
- Pulmonary Non-Asthma: 41
- Endocrine Non-Diabetes: 42
- Cancer: 13
- Hepatitis C: 271
- Glaucoma: 16
- Chronic Hepatitis B: 6
- Chronic Pain: 102

c. What are some examples of common medical conditions seen in the medical unit?

- Diabetes
- Hypertension
- Seizures

- Hepatitis
- Cardiovascular Disease
- Asthma
- Other Conditions
- Nurses see patients through sick call for such complaints as colds, back pain, athlete's foot, hemorrhoids, insect bites, sprains, and other injuries and illnesses.

d. What are you doing to provide health education to offenders?

We provide pamphlets and instruction sheets to offenders in the chronic care clinics and during sick call. Physicians and nurses also provide health education verbally to offenders. Numerous posters and notices are posted for offenders regarding general health risks such as flu and accidents. An annual health fair is conducted as well. We also do a lot of educating any time we get a new dialysis patient or even before that patient starts dialysis, they are given information and the dialysis nurses sit down and talk with them about what to expect.

e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?

No

f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain

Yes, we are faced with more chronically ill patients as the prison population ages. With this, we are faced with concerns regarding their ability to ambulate stairs and distances effectively, their ability to maintain their cognitive processes regarding use of medications and appointments, and their general knowledge of their disease process and treatment options. We find that older populations require more follow-ups, more treatments, more medications, and more staff interaction.

8. Mental Health Services:

a. How do offenders go about obtaining mental health treatment services?

All mental health 3 offenders or higher (moderate to maximum need) are automatically scheduled to see a Qualified Mental Health Professional at least once per month. Mental Health 4 offenders meet with a psychiatrist once per month as well as the Qualified Mental Health Professional. Any offender can receive mental health services by request through completing a Health Services Request form and checking the mental health box. All offenders at MCC, regardless of mental health score, can self refer for individual and/or group counseling. Any staff person can refer an offender for a mental health evaluation/consultation.

Offenders may also participate in structured group therapy on such topics as anger management, understanding and coping with mental illness, changing dysfunctional thinking, wellness, preparing for life outside of prison, parenting, positive relationships, and dealing with their feelings.

b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

There were no suicides at MCC in 2014. Offenders who are high risk of committing suicide are "red flagged" at the time of intake by receiving a "Suicide Risk" score of two or higher. All

MCC staff has been trained in suicide prevention. In addition, the MARS screen has been modified to allow staff to see the suicide risk score. High risk offenders are not allowed to have any medications in their cells. All offenders with a past history of suicide attempts are staffed monthly in the Clinical Executive Committee meeting.

c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

The Moberly Correctional Center has on average 21% of the total population on psychotropic medications.

d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

On average, we house approximately 24 offenders who carry a mental health score of MH-4 and approximately 280 with a MH-3 score. All offenders who carry a MH-4 rating are seen monthly by their Qualified Mental Health Professional and their treating psychiatrist. MH-3 offenders are seen once per month. Psychiatric staff monitors these offenders closely. A psychiatric nurse is also available to provide interventions as needed.

9. What is your greatest challenge in managing this institution?

MCC was built in 1963. Operating and maintaining an institution designed and built fifty years ago is a challenge. Maintaining positive morale of employees while benefits are reduced and wages fall behind becomes increasingly difficult. Funding for needed capital improvements has not been made available under present budget conditions. These issues are compounded each year they are put off.

10. What is your greatest asset to assist you in managing this institution?

Our greatest asset at MCC is our capable, experienced, and willing staff.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

While all vehicles are now operational, we have several in poor condition ranging to very good condition. The fleet ranges in years from 1987 (three vehicles) to 2014 (1 vehicle). Mileage ranges from 6,000 to 292,000 miles. Many of our vehicles are not dependable enough if we had to take a trip in them and much of our budget is eaten up on repairing an aged fleet.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

We continue to have good staff at MCC. The morale of the officers is for the most part good. Beside the issues already mentioned, another issue is the turnover of staff and the lengthy process it takes to replace COIs. From the time the video test is given until the person is hired causes us to lose potential personnel. This length of time also reduces security because others are forced to work short-handed to cover all the posts. This in turn reduces vacations causing morale issues.

13. **Caseworkers:**

A. How many caseworkers are assigned to this institution?

Case Managers-24

Corrections Classification Assistants-2

Clerical-6
Functional Unit Managers-4

B. Do you currently have any caseworker vacancies?

No

C. Do the caseworkers accumulate comp-time?

They can accumulate comp time but seldom do as time off is given the same work week.

D. Do the caseworkers at this institution work alternative schedules?

Yes

E. How do inmates gain access to meet with caseworkers?

They have an open door policy or by written request.

F. Average caseload size per caseworker?

110

- # of disciplinary hearings per month? 312
- # of IRR's and grievances per month? IRR-94 & Grievances-28
- # of transfers written per month? 105
- # of re-classification analysis (RCA's) per month? 202

G. Are there any services that you believe caseworkers should be providing, but are not providing?

No

H. If so, what are the barriers that prevent caseworkers from delivering these services?

N/A

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

- Impact of Crime on Victims
- Anger Management
- Pathway to Change
- Inside Out Dads
- Puppies for Parole
- Restorative Justice
- Pay It Forward

J. What other duties are assigned to caseworkers at this institution?

- Grievance Officer
- PREA Assistant
- Restorative Justice Coordinator
- MRP office is handled by two Case Managers and one IAC.
- Classification personnel cover custody posts as circumstances require.

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution? 9

B. Do you currently have any staff shortages? No

C. Do the parole officers accumulate comp-time? **No**

D. Do the parole officers at this institution flex their time, work alternative schedules? **Yes**

E. How do inmates gain access to meet with parole officers? **A parole officer is available in the MRP office and chapel office within the institution. All other officers can be contacted through written request or by dictated communication.**

F. Average caseload size per parole officer? **300 per PO. We have two Parole Officers that have specialized caseloads. One handles all releases and the other handles all offenders with active probations or 120 day probations.**

- # of pre-parole hearing reports per month? **60-70**
- # of community placement reports per month? **15-20**
- # of investigation requests per month? **60-70**

G. Are there any services that you believe parole officers should be providing, but are not providing? **No**

H. If so, what are the barriers that prevent officers from delivering these services? **N/A**

I. What type of inmate programs/classes are the parole officers at this institution involved in? **Parole officers are now facilitating ICVC, Anger Management, and Inside Out Dads.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.
The fact our department consistently lags far behind other states' department of corrections and other industries in salary is a concern regarding the recruiting and retention of quality, professional employees. We appreciate the support we consistently receive from the Joint Committee on Corrections and realize you face difficult challenges. We thank you for your service.

16. Does your institution have saturation housing? If so, how many beds?
MCC has no saturation housing.

17. **Radio/Battery Needs:**

- What is the number of radios in working condition?
380
- Do you have an adequate supply of batteries with a good life expectancy?
We currently have an adequate supply of radio batteries in stock and the chargers are in good condition.
- Are the conditioners/rechargers in good working order?
Our radio system is in good condition. Please note that we had to purchase new shoulder microphones as they were not holding up.

Joint Committee on Corrections

2014-2015

Information for Legislative Institutional Visits

Facility Name:	NORTHEAST CORRECTIONAL CENTER		
Custody Level		Warden	James A. Hurley
Total Acreage	112 Acres	Address	13698 Airport Rd.
Acreage w/in Perimeter			Bowling Green, MO 63334
Square Footage	1,829.520	Telephone:	(573) 324-9975
Year Opened	1998	Fax:	(573) 324-3559
Operational Capacity/Count (as of December 1, 2014)	2106/1995		
General Population Beds (capacity and count as of December 1, 2014)	1844/1747	Deputy Warden	Chantay R. Godert (Operations)
Segregation Beds (capacity and count as of December 1, 2014)	192/184	Deputy Warden	William E. Jones (Offender Management)
Treatment Beds (capacity and count as of December 1, 2014)	62/59	Asst. Warden	Richard (Scott) Griggs
Work Cadre Beds (capacity and count as of December 1, 2014)	8/5	Major	Timothy P. Truelove
Diagnostic Beds (capacity and count as of December 1, 2014)	N/A		
Protective Custody Beds (capacity and count as of December 1, 2014)	N/A		

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

- 1) *Heating & Domestic Hot Water Loops: If we don't replace our current heating system, we could encounter a crisis situation in the middle of winter with no heat and the necessity of finding emergency housing for over 2,000 offenders. Even without total failure of our current loop, we have lost up to 12,000 gallons of heated water per day, which results not only in increased gas bills, but water and sewer costs of \$9.54 per thousand gallons of water, and \$10,000 of chemical treatment costs every couple of months. Work on this project is set for bids next year.*
- 2) *Lethal Fence Problems: NECC has an ongoing concern with one of the grounding relays for shutting down the fence, as well as a communication problem between the two zones. Although we still are able to shut down safely, the process has slowed and become much more time consuming, which can be problematic if it becomes necessary to get into the fence in an emergency. We are currently awaiting specific information regarding the cost to a necessary part, but are estimating the cost to be in excess of \$10,000.*

- 3) *Continued Upgrading of the Building Automation System: The components are obsolete and we cannot get replacement parts. Without the controls, it is impossible to regulate the heat in the housing units, the heat or air-conditioning for Medical, Education, Food Service, HU #17, or the Administration building. The costs to the upgrades are approximately \$200,000, which is currently being implemented.*
- 4) *Fire Alarm System: The existing system is obsolete. There are no parts and there is only one person in the state certified to work on it. NECC has two control panels that are not working efficiently. If we were to have a fire in the area, they might not alarm. The cost to upgrade would be about \$300,000.*
- 5) *Roof Repair Issues: We have encountered numerous roofing and leak issues since the facility opened, which we have been unable to correct. Our major concern is that mold could develop, causing shutdowns of the areas affected with leaks. However, the leaks have also impaired work conditions for staff in those areas. The cost for the repairs would be \$90,000. The more critical areas in our Recreation buildings have been temporarily fixed by caulking them, but we will need to make permanent repairs to those and to several leaking housing units.*
- 6) *Parking Lot and Perimeter Road Repairs: When the engineers came out to evaluate these areas, NECC was informed that the root cause of the problem was a failed base. Any improvements on our part would be only temporary if the base itself is not fixed. Failure to do so would result in continued deterioration and will drastically increase future costs for repairs. Also, the poor condition will shorten the life on patrol vehicles, damage staff vehicles, and will affect our snow removal efforts in the winter months. The cost estimate is based solely on yardage and doubled for labor. The cost to repair the base is not included, due to inability to determine the extent of work involved. The cost of asphalt material and labor-only is estimated at \$1,200,000.*
- 7) *Feeder from MVE Transformer: The feeder from the transformer to the MVE area is the same as the feeder to the Food Service area. If the same failure issues we experienced with the Food Service feeder were to happen with the MVE transformer feeder, we would lose perimeter and yard lighting for the rear half of the facility, which includes our only sallyport providing entrance for vehicles. The cost would be approximately \$100,000. If the feeder shorts out, this cost would be increased to around \$400,000.*

- b. What capital improvement projects do you foresee at this facility over the next six years?
Each will be critical, as described per issue.
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
The above concerns are listed in order of priority. Each includes the consequences of not addressing the issues. Of major concern is our heating loop, which has become quite critical. However, the other items run closely behind in priority.

2. Staffing:

- a. Do you have any critical staff shortages? *Our Recruiting Team has done an outstanding job helping us keep our front line custody positions filled. However, we continue to face challenges with unavoidable shortages with staff we already have due to military leave, extended FMLA leave, departures to better paying employment and a relatively large number of staff placed on light-duty this year.*

- b. What is your average vacancy rate for all staff and for custody staff only? *NECC is experiencing approximately 2% of vacancies across the board for custody and for non-custody, as well.*
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? *It can. Ensuring that the minimum staffing levels are met while at the same time being fair to staff is sometimes a challenge.*
- d. What is the process for assigning overtime to staff? *NECC has worked hard to reduce overtime by emphasizing the use of flex time. Those mandated to work overtime are pulled from a rotating list. Once overtime is served, employees drop to the bottom of the list. Overtime is rarely required of non-custody staff.*
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? *Approximately 67% of comp time accrued is paid off; 33% is used.*
- f. Is staff able to utilize accrued comp-time when they choose? *If we are able to maintain our minimum staffing requirements, we try to allow staff to take off their comp time at their convenience.*

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? *Currently there are 217 inmates enrolled in school. This is 46% of the eligible inmates, those with E-scores ranging from 2-5.*
- b. How many (and %) of inmate students earn their HSE each year in this institution? *1157 inmates have earned their HSE since 9/9/98, which is an average of 72 offenders attaining their HSE each year. 79% of those offenders taking the test pass it.*
- c. What are some of the problems faced by offenders who enroll in education programs? *First, they see no need for having an education. They have a mind-set that questions the value of attaining an education, as they were previously making a living without it. Secondly, they enter the educational program with learned failure. The students have been consistently told they would fail, and their behaviors have supported and furthered their defeats. They have very little concept of what success can be. Thirdly, they lack the self-discipline to plan for the future; therefore, they have difficulty setting goals for themselves. It is challenging to attain an HSE when short-sightedness dominates your lifestyle.*

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have? *Gateway provides a 180-day and 365-day therapeutic community treatment*
- b. How many beds are allocated to those programs? *62*
- c. How many offenders do those programs serve each year? *Approximately 139*
- d. What percent of offenders successfully complete those programs? *Approximately 75.05%*
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? *Having limited time with clients in treatment due to counts, and DOC call-outs. It is challenging working the program around the institution's schedule (i.e., canteen, count, med-line and various other activities that can interfere with a daily treatment schedule). The program accommodates these unavoidable interruptions as well as possible. The DOC and Gateway work together to provide a continuation of services. The offender's ability to sign out at will after being stipulated to treatment is also a challenge. It decreases their motivation to participate in and successfully complete the program.*

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution? *NECC currently offers Professional Gardening, Building Trades, and Microcomputer Repair. Auto Mechanics and Commercial Vehicle Operator classes will be added in FY 2015.*
- b. How many offenders (and %) participate in these programs each year? *There were 90 offenders involved in the FY2014 Building Trades and Professional Gardening classes combined. The computer program served approximately 96 students. Program participation totaled 8.97% of the offender population.*
- c. Do the programs lead to the award of a certificate? *Each class provides a completion certificate and Department of Labor certificate. The Building Trades class also receives a NCCER certificate. The computer program provides offenders with three college credits through the St. Charles Community College, as well as a certificate through the Department of Labor.*
- d. Do you offer any training related to computer skills? *The classes have computers that can be used by students to enhance their classwork. The computer program offers the Basic Computer Repair course, Applications (Microsoft Office), as well as an A+ course.*

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution? *MVE Office Systems Factory (OSF) produces office systems that include fabric and laminated panels, laminated work surfaces and file cabinets, and indoor or outdoor signs. They also make plaques and frames for pictures.*
- b. How many (and %) of offenders work for MVE at this site? *NECC's OSF currently employs 56 offenders, roughly 3% of the population.*
- c. Who are the customers for those products? *NECC OSF sells to various state departmental agencies, cities, counties and to the Arkansas Department of Corrections.*
- d. What skills are the offenders gaining to help them when released back to the community? *The program assists offenders learn good habits by developing strong work ethics, proper hygiene, and courteous behavior towards staff and other offenders. Secondly, a Workplace Essential Skills course is offered to teach necessary skills to obtain employment upon release, including filling out a resume, interview presentation, developing communication skills and basic reading, writing and math skills. Finally, it offers a US Department of Labor Apprenticeship program to certify their learned skills, which can be very useful when seeking gainful employment.*

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? *Yes*
- b. How many offenders are seen in chronic care clinics? *The chronic care clinic has an average of 273 offenders visit each month (3278 in the past 12 months).*
- c. What are some examples of common medical conditions seen in the medical unit? *The majority of conditions were Hypertension, chronic pain, muscle strains, fractures, cancer, cardiac disease, pulmonary disease, infectious disease, Endocrine-DM, Hepatitis B, seizure disorders, hemorrhoids, testicle pain allergies and headaches.*
- d. What are you doing to provide health education to offenders? *Medical provides one-on-one education, pamphlets, posters, group education and an annual health fair*
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? *No*
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain *Yes. As our geriatric population increases, the*

following issues need to be considered: Inability to climb into bunks, inability to climb stairs to upper walk, thin mattresses for patients with severe osteoporosis, cold intolerance and inability to come to medical for medication, special dietary needs, increased need for medical assistive devices (wheelchairs, canes, walkers, etc.), increased need for oxygen tanks for those who suffer from chronic pulmonary illnesses, inability to bathe or use toilet by themselves and/or the need for assistive devices to utilize toilet and shower, increased chronic illnesses, which drive up the cost of medical care (medications, medical outcounts, inpatient care), increased need in infirmary beds due to the extremely ill and/or dying, safety issues due to frail conditions, need to educate non-medical staff to identify changing physical and mental conditions (such as dementia), and the need for increased monitoring to prevent the elderly from being victimized.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services? *When an offender has a mental health concern, they complete a HSR requesting to be seen by mental health. Offenders are also referred to mental health by medical, custody, substance abuse treatment staff and classification staff when they feel there is a mental health concern. When an offender is in crisis (death in the family, panic attack, etc.) they can come to medical and request to see a mental health staff member.*
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? *NECC had no successful suicides in the past year. If an offender states they are suicidal or any staff member believes that an offender is suicidal they are placed on suicide watch and are subsequently evaluated by a mental health staff member. Mental Health staff members provide suicide prevention training to staff members during their annual CORE training.*
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? *As of November 30, 2014, there were 326 offenders enrolled in the Mental Health Chronic Care Clinic. This is 16.2% of the population at this camp as of November 30, 2014.*
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? *As of December 17, 2014, at NECC we have 328 offenders in the Mental Health Chronic Care Clinic. Of those offenders 320 have a mental health score of a 3; 8 have a mental health score of a 4. One of those who have a mental health score of a 4 is also on involuntary medication status. All offenders in the Mental Health Chronic Care Clinic are seen by a Qualified Mental Health Professional at least once per month, they are seen more often if necessary. Offenders with a mental health score of a 3 are seen by the psychiatrist at least every 90 days for medication evaluation. Offenders with a mental health score of a 4 are seen at least every 30 days by the psychiatrist for medication evaluation. Offenders who are on involuntary medication status are seen by the psychiatrist at least every 14 days for medication evaluation.*

9. What is your greatest challenge in managing this institution? *It is becoming more difficult to uphold morale with our staff. Their workloads are increasing due to ongoing projects, additional security measures, absences, etc., and they are becoming discouraged, as they feel they are working more for less. I believe the majority struggle with the continued rise in insurance costs, lack of substantial salary increases and criteria changes that make it more difficult for them to promote to a better paying position. It is also arduous to retain experienced staff, as larger numbers are retiring, seeking better pay elsewhere, or are promoting to other facilities. This not only depletes our veteran and more knowledgeable workforce, it increases overhead for the Department due to expenses for training novice staff and cost of supervisory time dealing with related issues (increased mentoring,*

disciplines, staff grievances, etc.). Of secondary concern is the cost to maintain the facility, as the institution is aging and areas of the facility are deteriorating and require repairs.

10. What is your greatest asset to assist you in managing this institution? *Staff. Our employees are the backbone of the facility and everything that we accomplish is due to their assistance. I am very proud of the work that they do each day, and of the commitment they have to our mission.*

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?) *Most of our fleet is in fair condition. The 2000 Jeep, our highest mileage vehicle, has 281,000 miles and the majority of those remaining are well over 100,000. Due to the impact of the poor condition of our perimeter road, our vehicle patrol cars are frequently requiring repairs. Complicating matters has been the sacrifice of our garage supervisor in exchange for a vehicle mechanics instructor position, so our vehicles are being serviced by regular maintenance staff until we can hire an instructor and the course can begin. The following is a list of our vehicles and their mileage:*

'09 Ford Crown Vic – 98,735 miles	'98 International 4700 – 21,682
'85 Ford F800 – 148,053	'98 Ford F700 – 51,804
'07 Ford Crown Vic – 143,983	'97 Dodge Ram 350 – 125,958
'07 Ford Crown Vic – 130,041	'05 Ford E150 Econoline – 142,459
'07 Ford Crown Vic – 145,191	'04 Ford F350 1 ton – 91,497
'97 Ford F250 ¾ ton P/U – 50,226	01 Ford Taurus – 112,517
'97 Ford F250 ¾ ton P/U – 74,102	'08 Chev Impala – 110,866
'96 Chev C1500 – 131,236	'08 Chev Uplander – 121,979
'05 Ford Explorer – 132,006	'08 Chev Uplander – 125,475
'00 Jeep Cherokee – 281,669	'08 Chev Uplander – 122,322
'04 Chev Impala – 205,064	'92 International (range bus) – 99,247
'06 Ford Crown Vic – 152,476	'07 Ford Crown Vic – 62,737
'06 Ford Crown Vic – 137,322	'07 Chev Impala – 138,663
'08 Chev Uplander – 115,338	'09 International (bus) – 99, 657
'08 Ford E350 Club Wagon – 134,563	'14 Dodge Caravan – 15, 237

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (Please have the Major answer) *Staff morale is at a medium level here at NECC. It is affected mostly by moderately low income and cost of living. New employees have to work 10 years to be vested and they have to pay on their retirement. Last issue is the amount of education that has been emphasized to promote from custody to classification.*

13. Case Managers:

- How many case managers are assigned to this institution? *Eighteen*
- Do you currently have any case managers vacancies? *Three current vacancies*
- Do the case managers accumulate comp-time? *Comp time is rare and is usually accrued by issues such as emergency situations, training (and travel), institutional searches, etc. Most comp time is flexed off when possible.*
- Do the case managers at this institution work alternative schedules? *If approved, an Inside/Out Dad's class will be held on Thursday evenings and will require one case manager.*
- How do inmates gain access to meet with case managers? *Offenders submit written requests for an appointment, or meet with classification staff during open office hours.*
- Average caseload size per case manager? *Each case manager has an average of 200 offenders per housing unit.*
 - # of disciplinary hearings per month? *18.63*

- # of IRR's and grievances per month? *10.27*
- # of transfers written per month? *6.36*
- # of re-classification analysis (RCA's) per month? *18.91*
(NOTE: The above totals for the month of November 2014 and are a relatively accurate average for any month)

14. Are there any services that you believe case managers should be providing, but are not providing?
No

15. If so, what are the barriers that prevent case managers from delivering these services? *N/A*

16. What type of inmate programs/classes are the case managers at this institution involved in? *ICVC, Pathways to Change, Inside/Out Dads, Anger Management, Puppies for Parole, ES/LS*

17. What other duties are assigned to case managers at this institution? *Case managers assist with custody duties when called upon (searches, etc.), serve as Acting Functional Manager when necessary, and participate in policy review committees. One case manager is assigned the duties of Institutional Grievance Officer.*

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution? *NECC has five Institutional parole Officers and one Unit Supervisor.*

B. Do you currently have any staff shortages? *No*

C. Do the parole officers accumulate comp-time? *No*

D. Do the parole officers at this institution flex their time, work alternative schedules? *Three Institutional Parole Officers work five days a week, eight hours a day. Arrival times vary from 7:00am to 7:30am. Two Institutional Parole Officers work four days a week, ten hours a day. With prior approval from the Unit Supervisor, staff are allowed to flex their schedule within the week.*

E. How do inmates gain access to meet with parole officers? *Offenders use the "kite" system and write their IPO a note for review. The offender either receives a reply by mail or is put on a call-out to see his IPO. Officers also have call-outs for offenders they need to see to complete a report, home plan, offender response, etc. At the present time, the IPO's go to the offenders assigned to treatment, the reception and orientation wings, and those assigned to segregation. Appointments are made with staff to use office space in each of these units.*

F. Average caseload size per parole officer? *Approximately 415 offenders per officer*

- # of pre-parole hearing reports per month? *Approximately 66 per month*
- # of community placement reports per month? *Approximately 16 per month*
- # of investigation requests per month? *Approximately 43 per month*

G. Are there any services that you believe parole officers should be providing, but are not providing? *None*

H. If so, what are the barriers that prevent officers from delivering these services? *N/A*

I. What type of inmate programs/classes are the parole officers at this institution involved in? *Because of changes in workload, NECC IPO's are not currently involved in any programs. However, one staff person does oversee the 64-bed treatment program, another staff person oversees the Institutional parole Officer's role in the Transitional Housing Unit, and one oversees the offenders' release plans who have a mental health score of 4 or 5.*

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

As our geriatric population rapidly increases, so does our need for handicap vehicles. Medical staff attempt to schedule outcounts to work around the limitations of our single handicap vehicle, but it is definitely a growing concern. On numerous occasions, we have scrambled to borrow a handicapped

accessible vehicle to accommodate our physically challenged offenders. We foresee the number of these individuals expanding in the coming years and would like to add another handicapped-accessible vehicle to our fleet to operate more efficiently.

16. Does your institution have saturation housing? *N/A* If so, how many beds? *N/A*

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? *327 radios in good working condition*
- b. Do you have an adequate supply of batteries with a good life expectancy? *We currently have approximately 654 good batteries.*
- c. Are the conditioners/rechargers in good working order? *Yes*

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name:	Ozark Correctional Center		
Custody Level	Minimum	Warden	Brian O'Connell
Total Acreage	80	Address	929 Honor Camp Lane
Acreage w/in Perimeter	12		Fordland, MO 65652
Square Footage	166185	Telephone:	417-767-4491
Year Opened	1963	Fax:	417-767-2014
Operational Capacity/Count (as of December 1, 2014)	738/667		
General Population Beds (capacity and count as of December 1, 2014)	88/21	Deputy Warden	Stacy Kleier Offender Management
Segregation Beds (capacity and count as of December 1, 2014)	16/5	Deputy Warden	Marty Sirmons Operations
Treatment Beds (capacity and count as of December 1, 2014)	650/646	Asst. Warden	N/A
Work Cadre Beds (capacity and count as of December 1, 2014)	0	Asst. Warden	N/A
Diagnostic Beds (capacity and count as of December 1, 2014)	0	Major	Johnny Burkdoll
Protective Custody Beds (capacity and count as of December 1, 2014)	0		

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

OCC is an older facility, but its condition would be considered good overall, with a few areas poor to fair. Steady improvements have been made to the infrastructure and buildings over the years. Our perimeter security has also been significantly enhanced through the recent replacement of our perimeter fence detection system. Several older buildings at the facility are a continuing operational and budget challenge.

b. What capital improvement projects do you foresee at this facility over the next six years?

Electrical service to our institution and throughout our buildings is insufficient for modern business use. Our service pre-dates computers, video and most common modern business use. All buildings, including the offender housing units, are at near the maximum on circuits used and panel boxes. We are also susceptible to power spikes and lightning. A thorough electrical needs and it should be performed and our service upgraded accordingly.

We have 4 double-wide trailers used for drug treatment services that are badly in need of replacement. Two of the trailers are used for treatment staff office space and the other two are used as offender programming space (which is always at a premium). These trailers are 18 – 20 years old and were not made to withstand this type of use. Considering the age and condition of the trailers, repairs (though necessary) are not a very effective use of funds. Ideally these trailers would be replaced with a permanent building(s), but new trailers would be an acceptable and less-costly solution.

Replacement of exterior doors and windows is another area that needs attention. Our older buildings have single-paned windows in them, which are very inefficient and make it difficult to maintain a comfortable working environment for staff with offices in these areas (hot in the summer and cold in the winter). Metal exterior doors rust and warp over time, and we have several throughout the facility that need to be replaced.

We also will need to repair and possibly re-asphalt the entry road to the facility and the perimeter road at some point in the future.

- c. How critical do you believe those projects are to the long-term sustainability of this facility?

As a dedicated drug treatment facility, treatment space is essential to accomplishing our mission, so we definitely need to look at some infrastructure improvements to support that. Though we can maintain for a while with the programming facilities we have, they are certainly inadequate and not worth putting much money into. Improvements to the electrical system are needed for the betterment of institutional operations, but are not currently at a critical point as far as our sustainability. The other areas noted above do need to be addressed, but we can continue to make improvements on a piecemeal basis if funding for larger projects is not available.

2. Staffing:

- a. Do you have any critical staff shortages? **No**
- b. What is your average vacancy rate for all staff and for custody staff only? **20%**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? **No**
- d. What is the process for assigning overtime to staff?

We do not have a lot of overtime, but if the need arises we have a log that is seniority based on volunteers for overtime.

- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

Approximately 50% of comp time accrued is paid off; 50% is used.

- f. Is staff able to utilize accrued comp-time when they choose? **Yes if coverage permits.**

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? **137/20%**
- b. How many (and %) of inmate students earn their HSE each year in this institution? **75/21%**
- c. What are some of the problems faced by offenders who enroll in education programs? **Long Term drug/alcohol abuse, history of failure in academics (especially non-readers) poor economic backgrounds, poor attitudes and poor testing skills.**

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?

OCC is a treatment dedicated correctional facility. All offenders assigned to OCC participate in the Therapeutic Community treatment program.

- b. How many beds are allocated to those programs? **650**
- c. How many offenders do those programs serve each year?

This is a year long program, serving 650 offenders. Our transitional numbers indicate approximately 950 offenders experience some portion of their treatment at OCC in the course of a calendar year.

- d. What percent of offenders successfully complete those programs? **Approximately 97%**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? **The most challenging component is the limited space for treatment groups and classes.**

5. Vocational Programs: DOES NOT APPLY AT OCC

- a. What types of vocational education programs are offered at this institution?
- b. How many offenders (and %) participate in these programs each year?
- c. Do the programs lead to the award of a certificate?
- d. Do you offer any training related to computer skills?

6. Missouri Vocational Enterprises: DOES NOT APPLY AT OCC

- a. What products are manufactured at this institution?
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes**
- b. How many offenders are seen in chronic care clinics? **421**
- c. What are some examples of common medical conditions seen in the medical unit?

Allergies, Asthma, Hepatitis C and Hypertension

- d. What are you doing to provide health education to offenders?

Annual Health Fair, Education handouts for most S/C encounters. All of these are available in the Library as well.

- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **No**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain **Yes. Also, we are seeing in the younger offenders things we would not normally see in patients their age.**

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?

Offenders submit a MSR (Medical Service Request form) to request a mental health session. Offenders who take psychiatric medications are automatically seen on a monthly base.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **OCC have had none**
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **72/11%**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

90 offenders are considered chronically/seriously mental ill. They are enrolled in mental health chronic care and are seen by licensed staff at least monthly.

9. What is your greatest challenge in managing this institution?

Limited budget for upkeep of an older facility, and the lack of adequate space for programming that is required under our contract with the Gateway Foundation.

10. What is your greatest asset to assist you in managing this institution?

We are very fortunate to have been able to recruit and retain exceptional staff, especially supervisory staff. All OCC staff are committed to the mission of long-term treatment, and to the therapeutic community model.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

High mileage; fair to good condition

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. (Please have the Major answer) **Low/Medium**

OCC has went thru a number of changes in the year with new administration and several new custody supervisors. Budget cuts over the years, cost of living is more expensive but the pay and benefits have not increased in spite of their loss, changes to the retirement, no tuition reimbursement, and matching monies for deferred comp also hurt morale. Changes in job expectations make it harder to promote.

13. Case Managers:

- A. How many case managers are assigned to this institution? **8**
- B. Do you currently have any case managers vacancies? **No**
- C. Do the case managers accumulate comp-time? **No**
- D. Do the case managers at this institution work alternative schedules? **Yes**
- E. How do inmates gain access to meet with case managers? **Open door**
- E. Average caseload size per case manager?
 - # of disciplinary hearings per month? **66**
 - # of IRR's and grievances per month? **18/5**
 - # of transfers written per month? **5 average**
 - # of re-classification analysis (RCA's) per month? **61 approximately**
- F. Are there any services that you believe case managers should be providing, but are not providing? **No**
- G. If so, what are the barriers that prevent case managers from delivering these services? **N/A**
- H. What type of inmate programs/classes are the case managers at this institution involved in?
Pathway to Change

- I. What other duties are assigned to case managers at this institution?
Medicaid Coordinator, Life Skills Coordinator, CO I Hiring, Staff UA Collector, Special Olympics Coordinator, Work Release Coordinator, Puppies for Parole Coordinator, Pathway to Change Coordinator, Child Support and Career Center Liaison

14. Institutional Probation and Parole officers:

- A. How many parole officers are assigned to this institution? **3 Parole Officers**
- B. Do you currently have any staff shortages? **No Shortages (though there are 2 full time and 1 part-time officers, but really need 3 full-time)**
- C. Do the parole officers accumulate comp-time? **No**

D. Do the parole officers at this institution flex their time, work alternative schedules?

No alternate schedules, have to flex any work over during the week.

E. How do inmates gain access to meet with parole officers?

Offenders have assigned open door times to meet with their IPO. If an officer needs to see an offender outside the times, he/she call them to the P & P office. If there is an emergency situation and offender cannot wait until open door, the Case Manager can call and ask that the offender be seen ASAP.

F. Average caseload size per parole officer? Part-time 140 Full-Time 263

- # of pre-parole hearing reports per month? **2 or 3**
- # of community placement reports per month? **None**
- # of investigation requests per month? **Approximately 12 on average**

G. Are there any services that you believe parole officers should be providing, but are not providing? **No**

H. If so, what are the barriers that prevent officers from delivering these services? **N?A**

I. What type of inmate programs/classes are the parole officers at this institution involved in?

One Parole Officer facilitated Anger Management and Unit Supervisor does new offender orientation

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **No others at this time.**

16. Does your institution have saturation housing? If so, how many beds? **Yes, 14 beds**

17. Radio/Battery Needs:

- What is the number of radios in working condition? **188**
- Do you have an adequate supply of batteries with a good life expectancy? **Yes**
- Are the conditioners/rechargers in good working order? **Yes**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Potosi Correctional Center			
Custody Level	C-5	Warden	Troy Steele
Total Acreage	128.77	Address	11593 State Highway O
Acreage w/in Perimeter	35		Mineral Point, MO 63660
Square Footage	314,663	Telephone:	573-438-6000
Year Opened	1989	Fax:	573-438-6006
Operational Capacity/Count (as of December 24, 2014)	922/918		
General Population Beds (capacity and count as of December 24, 2014)	584/576	Deputy Warden	Cindy Griffith, DWOM
Segregation Beds (capacity and count as of December 24, 2014)	182/165	Deputy Warden	Jamie Crump, DWO
Treatment Beds (capacity and count as of December 24, 2014)	46/45	Asst. Warden	Teri Lawson
Work Cadre Beds (capacity and count as of December 24, 2014)	90/86	Asst. Warden	Teri Lawson
Diagnostic Beds (capacity and count as of December 24, 2014)	N/A	Major	Greg Dunn
Protective Custody Beds (capacity and count as of December 24, 2014)	46/46		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? **The overall condition of the physical plant is considered fair.**
- b. What capital improvement projects do you foresee at this facility over the next six years? The following projects are on file in the Capital Improvements Office:
 - 1) **Department Priority 0 – Replace emergency generators. Current cost \$427,626.00.**
 - 2) **Department Priority 3 – Replace the electronic door control system. Current cost \$359,221.00.**
 - 3) **Department Priority 11 – Replace Building Automated system, air lines and control wiring. Current cost \$1,062,750.00.**
 - 4) **Department Priority 34 – Replace exterior lighting with energy efficient lighting. Current cost \$500,849.00.**
 - 5) **Department Priority 90 – Replace heat system piping, heating and cooling coils. Current Cost \$3,079,920.00.**
 - 6) **Department Priority 90 – Remove and replace vinyl tile in Administration Building. Current cost \$469,094.00.**
 - 7) **Department Priority 90 – Research and address the cause of excessive moisture in Housing Units 5 and 6 during the heating season. Current cost \$258,744.00.**

- 8) Department Priority 90 – Replace existing elevators. Current cost \$630,422.00.
- 9) Department Priority 90 – Renovate showers and restrooms in Housing Unit 7. Current cost \$205,950.00.
- 10) Department Priority 90 – Repair asphalt parking lot and Perimeter road. Current cost \$297,283.00.
- 11) Department Priority 90 – Replace Power Plant water softener system. Current cost \$93,776.00.
- 12) Department Priority 90 – Replace heating and cooling units for Housing Unit 7. Current cost \$81,180.00.

c. How critical do you believe those projects are to the long-term sustainability of this facility? **All of the above listed projects are important to either the security or operation of this facility.**

2. Staffing:

- a. Do you have any critical staff shortages? **Custody staffing has been critical for several years, and to meet safety minimums, overtime is often necessary to ensure the public safety.**
- b. What is your average vacancy rate for all staff and for custody staff only? **For custody staff the vacancy rate is about 14%. This number is derived from a formula that considers there are 205 COI positions at PCC, and we have hired 30 COI's during this calendar year. At any given time, there are about 2% of the COI positions that are vacant, awaiting the hiring process. For all staff the vacancy rate is an average of 1%.**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? **Overtime is often necessary to meet the minimal staffing pattern. In turn, extensive efforts are dedicated to ensure shift supervisors are fiscally responsible when assigning overtime.**
- d. What is the process for assigning overtime to staff? **Overtime is usually on a volunteer basis. However, during times when many vacancies are needed (such as inclement weather), it is assigned by way of a “revolving list” that is seniority based.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 68% of comp time accrued is paid off; 32% is used.**
- f. Is staff able to utilize accrued comp-time when they choose? **Generally, they do. This does however, depend on the dates requested. I would estimate that about 15% of the time requested is denied due to staff numbers of the date selected.**

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school? **This is a voluntary program. We currently have six (6) offenders (.006%) attending classes to earn their HST.**
- b. How many (and %) of inmate students earn their GED each year in this institution? **Approximately 9 offenders (.01%) earn their HSTs each year.**
- c. What are some of the problems faced by offenders who enroll in education programs? **Learning disabilities, age, no internet access, schoolwork interfering with extra curricular activities, limited space and movements.**

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have? **We offer N/A and A/A on a volunteer basis or as part of a program plan.**
- b. How many beds are allocated to those programs? **No beds are allocated for drug treatment offenders.**

- c. How many offenders do those programs serve each year? **30 to 60 (depends on participation).**
- d. What percent of offenders successfully complete those programs? **Offenders do not successfully complete as NA and AA are ongoing programs without completion.**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? **Lack of qualified staff and volunteers to teach these programs.**

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution? **The only vocational program offered is by Missouri Vocational Enterprises (MVE), and they are on the job training hours.**
- b. How many offenders (and %) participate in these programs each year? **We currently have 33 offenders participating in on the job training.**
- c. Do the programs lead to the award of a certificate? **While offenders work they accumulate OJT hours. Once they have accumulated 2,000 OJT hours they receive a certificate.**
- d. Do you offer any training related to computer skills? **MVE does not offer any training related to computer skills. However, computer training offered by VIC's and offender tutors is utilized in the MVE for lay-out, programming and operation of a precision plasma-arc metal cutting machine.**

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution? **MVE Tube Bending Factory manufactures various farm products, hunting products, which include deer stands, cattle panels/gates as well as miscellaneous steel fabricated products such as barbecue grills, chair frames and special projects on request, i.e., pull carts, ramps, bird feeders and plant hangers.**
- b. How many (and %) of offenders work for MVE at this site? **There are currently 33 offenders working at this site which is .0358%.**
- c. Who are the customers for those products? **State agencies, non-profit organizations and individual state employees all purchase products from MVE Tube Bending Factory.**
- d. What skills are the offenders gaining to help them when released back to the community? **Offenders working at MVE Tube Bending Factory acquire various steel fabrication skills such as welding, steel tube bending, cutting, small machine set-up and operation and inspection. Offenders in clerical positions become proficient in accounting, planning and expediting of goods and services. Finally, all offender employees are required to take courses in computer literacy and workplace essentials (resume building, personal conduct in the workplace, time management, etc.)**

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes**
- b. How many offenders are seen in chronic care clinics? **623**
- c. What are some examples of common medical conditions seen in the medical unit? **Hypertension, Diabetes, Common Colds, Hepatitis C, Heartburn, Athletes Foot, Hernia, Cancer, Asthma, COPD, Seizures, Headaches, Lacerations, Fractures, Joint injuries.**
- d. What are you doing to provide health education to offenders? **Education is completed during chronic care visits for the appropriate disease process. We also have an annual offender health fair with educational material provided. Education sheets are provided for appropriate diagnosis when an offender is seen in sick call. Worksheets are available for medications explaining uses, side effects, etc.**

- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **We have had no active TB cases this year.**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? **Yes.** If yes, please explain: **We have a 12 bed infirmary and at any given time we have 4-6 or more permanent patients. These are mostly patients who for whatever health reason or age can not function in a housing unit. This decreases the amount of beds we have to treat acutely ill patients.**

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services? **Health Services Request (HSR); Referral from medical physician; referral from Qualified Mental Health Professional (QMHP); or if classified as a need by Diagnostic Reception Center when entering Department of Corrections.**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **There were no successful suicides this past year. There were however two SR-3's, very serious attempts this year. We continue to take advantage of the installed cameras in Housing Unit One and Housing Unit Two. We also work with training department to provide suicide intervention classes for ALL staff.**
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **221 offenders total are taking psychotropic medications which is approximately 24% of the offender population.**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? **As mentioned above, we currently have 221 offenders who are being prescribed psychotropic medications. Currently, we have approximately 260 offenders in the chronic care case load which reflects 39 offenders who are being monitored after medications have been discontinued or who are in our special Needs Unit (SNU) that do not take any medications. Of those that are not in SNU, they will be monitored for a period of time and discharged from chronic care clinic if they remain stable. Of the 260 we currently have 11 who are on involuntary medication status which is reviewed every six months. All offenders are seen by the Qualified Mental Health Professional (QMHP) every 30 days. MH-4's are seen by the psychiatrist every 30 days, and MH-3's are seen by the psychiatrist every 90 days. Those on involuntary medications are seen by the psychiatrist every 2 weeks and those in SNU are also reviewed by the treatment team every 30 days. The Special Needs Unit (SNU) offers realistic and functional training to offenders diagnosed as mentally retarded/developmentally disabled in the least restrictive environment possible. The 46 bed single man cell Special Needs Unit also provides security while promoting optimal adjustment to the institutional life and/or transition back to society.**

9. What is your greatest challenge in managing this institution? **1) Deterioration of vehicle fleet; 2) Resources required for compliance with PREA; 3) With retirement and advancement resulting in large turnover of staff, mentoring and training new staff is essential.**

10. What is your greatest asset to assist you in managing this institution? **Senior staff and support from administrative staff at Central Office.**

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

LICENSE #	ASSIGNMENT	MILEAGE	STATUS
13-0400	Pool	153,009	High mileage
13-0405	Pool	127,111	Operates OK, needs paint.
13-0408	Dump Truck	20,913	Operates but in rough condition.
13-0409	Vehicle Perimeter	165,515	High mileage, needs paint.
13-0412	CTU Secure Car	83,465	OK
13-1024	Chevy Truck	10,750	Good condition.
13-0417	Pickup	85,559	Very rough condition, transmission getting weak.
13-0051	Dodge Mini van	10,710	OK.
13-0882	Jeep/Bed Weather	108,700	Very rough condition, used only for snow VP.
13-0231	Van-Multi Purpose	128,034	Rough condition.
32-0278	Mini Van/Secure	106,694	OK
13-0284	Vehicle Perimeter	184,287	High mileage, needs paint.
13-0411	CTU Handicap Van	43,861	OK
13-0723	CTU Secure Car	96,278	OK
13-0780	CTU Secure Car	160,417	High mileage.
13-0786	CTU Secure Car	102,375	OK
13-0796	CTU Secure Car	122,444	Bad paint.
13-0810	CTU Secure Car	37,246	OK
32-0281	Mail Van	235,930	High mileage, several service lights on.
13-0898	Ford Box Truck	83,004	OK

We had four vehicles breakdown this year. These vehicles had to be towed due to high mileage and age of vehicles. We maintain normal preventive maintenance on our fleet of vehicles but considering that they have high mileage on them when handed down from other state agencies staff are not overly confident in them when leaving the facility.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **I would categorize the morale of the Custody Staff as "medium". However, we ask more of our custody officers every day and expect a higher level of professionalism from them. Reductions in employee benefits over the past few years and scarce/small increases in pay are the primary reasons that morale is not higher.**

13. Caseworkers:

- A. How many caseworkers are assigned to this institution? **1 Case Manager III, 10 Case Manager II's, 1 Case Manager I, 2 Classification Assistants.**
- B. Do you currently have any caseworker vacancies? **No.**
- C. Do the caseworkers accumulate comp-time? **Case Managers are required to utilize flex time to avoid compensatory time.**
- D. Do the caseworkers at this institution work alternative schedules? **Case Managers will flex their work schedules to meet the needs of their respective housing unit.**
- E. How do inmates gain access to meet with caseworkers? **Offenders in General Population access the case manager through daily office hours. Administrative Segregation offenders access the case manager during rounds conducted at the cell door.**

Average caseload size per caseworker? **85**

- # of disciplinary hearings per month? **235**
- # of IRR's and grievances per month? **135**
- # of transfers written per month? **15**
- # of re-classification analysis (RCA's) per month? **75**

E. Are there any services that you believe caseworkers should be providing, but are not providing?

All services sanctioned by the Department of Corrections are being offered by PCC Case Managers.

F. If so, what are the barriers that prevent caseworkers from delivering these services? **N/A**

G. What type of inmate programs/classes are the caseworkers at this institution involved in?

Impact Crime on Victims; Anger Management; Pathways to Change; Inside/Out Dads, Transition Training; ES/LS and Anthony Robbins.

H. What other duties are assigned to caseworkers at this institution? **Grievance Officer, Puppies for Parole, Offender Photo and I.D. Updates; Potosi Reintegration Unit and Restorative Justice.**

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution? **One full time Parole Officer.**

B. Do you currently have any staff shortages? **No.**

C. Do the parole officers accumulate comp-time? **Yes.**

D. Do the parole officers at this institution flex their time, work alternative schedules? **Yes.**

How do inmates gain access to meet with parole officers? **This depends on the housing unit, 1 thru 4 the officer goes to the housing unit and/or responds to kites, 5 thru 6 the offender reports to the office and/or the officer responds to kites; Housing Unit 7 the officer meets in the housing unit and/or responds to kites. A written form that is placed in the offender's daily mail.**

Average caseload size per parole officer? **One officer is assigned the entire population, approximately 900 inmates.**

- # of pre-parole hearing reports per month? **On average 12.**
- # of community placement reports per month? **On average 6.**
- # of investigation requests per month? **On average 11.**

E. Are there any services that you believe parole officers should be providing, but are not providing? **More involvement with private home plan placement.**

F. If so, what are the barriers that prevent officers from delivering these services? **Workload and non-compliance/lack of effort by inmate.**

G. What type of inmate programs/classes are the parole officers at this institution involved in? **Pre-release classes.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **With the age of our institution we are beginning to have some maintenance issues with infrastructure. We are also losing staff due to inequitable pay compared to private sector. Many staff are seeing minimum wage increasing but not seeing any increase in their salaries proportionately.**

16. Does your institution have saturation housing? If so, how many beds? **Effective January 1, 2010 forty-one (41) offenders were added as saturation to our operating capacity increasing it to 903. Our operating capacity is now 922.**

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? 283 working handheld radios and 4 that are awaiting repair. PCC has a relatively new radio system that is in good repair.**
- b. Do you have an adequate supply of batteries with a good life expectancy? Yes, battery numbers are adequate and hold charge that is sufficient for several shifts.**
- c. Are the conditioners/rechargers in good working order? Yes**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: South Central Correctional Center			
Custody Level	Medium/Maximum	Warden	Michael Bowersox
Total Acreage	205	Address	255 W. Hwy 32
Acreage w/in Perimeter	45		Licking, MO 65542-9069
Square Footage	400000	Telephone:	(573) 674-4470
Year Opened	2000	Fax:	(573) 674-4908
Operational Capacity/Count (as of December 1, 2014)	1692/1638		
General Population Beds (capacity and count as of December 1, 2014)	1152/1146	Deputy Warden	Terrena Ballinger
Segregation Beds (capacity and count as of December 1, 2014)	268/267	Deputy Warden	Roger Terry
Treatment Beds (capacity and count as of December 1, 2014)	0	Asst. Warden	Michele Buckner
Work Cadre Beds (capacity and count as of December 1, 2014)	192/173	Asst. Warden	N/A
Diagnostic Beds (capacity and count as of December 1, 2014)	0	Major	Anthony Williams
Protective Custody Beds (capacity and count as of December 1, 2014)	72/72		

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

The overall condition of the physical plant of South Central Correctional Center is good.

The roofs leak and metal doors are rusting. The Del-Norte fence system is in desperate need of upgrading-only one (1) of thirteen (13) zones has received updating.

b. What capital improvement projects do you foresee at this facility over the next six years?

The Administration parking lot will need paving within the next year or two (2). SCCC currently seals the parking lot every other year. The mobile office unit which currently houses our training department will require replacement within the next two (2) years.

The housing unit control bubble floors are needing replacement as the rollers on the chairs wear through the floor tile to the plywood. The water softener in the Power Plant is five (5) years past it's life cycle and operating at fifty percent efficiency.

c. How critical do you believe those projects are to the long-term sustainability of this facility?

The water softener replacement at this time is our most urgent issue, but is not what we would consider critical to the long term sustainability of the facility.

2. Staffing:

a. Do you have any critical staff shortages? *SCCC is short two (2) Cook II's.*

b. What is your average vacancy rate for all staff and for custody staff only?

South Central Correctional Center's average vacancy rate for all staff is approximately sixty-one (61). Of the total, approximately forty-nine (49) were custody staff members. This includes retirees.

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

The accrual and usage of compensatory time significantly impacts operations from a custody and food service staffing viewpoint and it negatively impacts staff morale. The accrual and usage of compensatory time by non-custody staff creates minimal impact.

d. What is the process for assigning overtime to staff?

Custody staff overtime assignment is outlined in the union agreement.

Officers are first given the opportunity to volunteer. If there still remains a deficiency in meeting minimum staffing levels, the mandatory overtime list is utilized. The mandatory list requires the officer(s) at the top of the list to report for duty, if not currently on duty.

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

Approximately 66% of comp time accrued is paid off; 34% is used.

f. Is staff able to utilize accrued comp-time when they choose?

South Central Correctional Center makes every effort to flex off any earned overtime by both custody and non-custody staff members to minimize the accrual of compensatory time.

3. Education Services:

a. How many (and %) of inmate students at this institution are currently enrolled in school?

SCCC currently has 266 students (45%) enrolled in school.

b. How many (and %) of inmate students earn their HSE each year in this institution?

Fifty-nine (59) students (11%) earned their HSE last year at SCCC.

c. What are some of the problems faced by offenders who enroll in education programs?

1. Insufficient seat space in Education due to staff shortages has resulted in offenders being placed on a waiting list to start taking classes.

2. Students who are only in school because it is mandatory, creating distractions in the learning environment that hinders the progress of those who truly wish to earn their HSE.

3. Conduct violations received resulting in assignment to Administrative Segregation.

4. Educational standards & expectations evolving at a faster pace than curriculum can keep up with.

4. Substance Abuse Services:

a. What substance abuse treatment or education programs does this institution have? N/A

b. How many beds are allocated to those programs? N/A

c. How many offenders do those programs serve each year? N/A

d. What percent of offenders successfully complete those programs? N/A

e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? N/A

5. Vocational Programs:

a. What types of vocational education programs are offered at this institution? N/A

b. How many offenders (and %) participate in these programs each year? N/A

c. Do the programs lead to the award of a certificate? N/A

d. Do you offer any training related to computer skills? N/A

6. Missouri Vocational Enterprises:

a. What products are manufactured at this institution?

The SCCC Furniture Restoration Factory is a two-phase operation within the Missouri Vocational Enterprises. The first phase is the new line manufacturing. In this phase we manufacture new furniture; for example, executive, conference room, and waiting room style chairs, couches, and tables from solid wood. The furniture, if necessary, can then be upholstered with fabric, vinyl, faux leather, or real leather. The second phase is furniture restoration. In this phase furniture is restored for courthouses, state departments, public schools, and libraries in addition to personal furniture for any state employee who requests refinishing. We have a set fee for manufactured items and the fee for restoration is based upon the item(s).

- b. How many (and %) of offenders work for MVE at this site?

SCCC currently has eighty (80) workers consisting of 6.98% of our general population.

- c. Who are the customers for those products?

Any Missouri State agency, Missouri State employee, or any Missouri non-profit organization.

- d. What skills are the offenders gaining to help them when released back to the community?

MVE is an on-the job training program. The skills an offender is offered at the SCCC factory range from upholstery to woodworking/carpentry. There are also a few offenders who are afforded the opportunity to learn more advanced skills such as record keeping, clerical skills and small business operation. MVE is committed in creating relevant job training for offenders so they may become productive citizens. We strive to promote personal attributes, as well as, offering the offender job skills. At the same time, the offender must maintain proper institutional behavior and conduct in order to remain employed within the factory. The offenders in MVE receive special classroom training, which is from a PBS series titled "Workplace Essential Skills". This training will develop workplace skills in employment, communication and writing, math, and reading. This is presented from a VCR tape or CD. Computer literacy training will be offered from a CD (Jan's Illustrated Computer Literacy 101) and a stand-alone computer. Upon completion of these two programs, certificates are issued to the offender.

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? Yes.
- b. How many offenders are seen in chronic care clinics?

Nine hundred forty-five (945) offenders are enrolled in chronic care clinics. Offenders are seen monthly, every three (3) months, or every six (6) months, depending on the clinic they are enrolled in.

- c. What are some examples of common medical conditions seen in the medical unit?

The most common medical conditions seen in the SCCC Medical unit include injuries, pain, dental complaints, sinus problems, constipation, and medication needs/questions.

- d. What are you doing to provide health education to offenders?

SCCC offers one-on-one education at the time of the nurse/doctor visit, as well as chronic care education, information provided via the offender information channel, and hosts an annual health fair.

- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? No.
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain

Yes, the aging population requires more assist devices such as wheelchairs, canes, and walkers; as well as experience failing eyesight, memory problems, exacerbation's of chronic illnesses, and inability to function in general population.

8. Mental Health Services:

a. How do offenders go about obtaining mental health treatment services?

Offenders utilize a Health Services Request (HSR) form for mental health treatment. They can also be referred to mental health by custody, medical, or any other DOC staff member.

b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

South Central Correctional Center has had zero (0) successful suicides during the past year. (0% of the population) The Mental Health department has multiple interventions for the prevention of suicide. The department participates in CORE Training providing suicide prevention and mental illness classes multiple times throughout the year for SCCC staff. Offenders are afforded prevention and intervention strategies to include individual, grief and crisis counseling services as warranted. "You Can Prevent Suicide" posters are strategically placed noting the warning signs and what to do if they suspect themselves or another offender is at risk. Offenders may also "self declare" a mental health emergency.

c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

One hundred ninety-five (195) offenders (11.89%) were prescribed psychotropic medications during the month of November.

d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

There are two hundred twenty-two (222) offenders at South Central Correctional Center who are currently documented as chronically, mentally ill (MH3 or above). The chronically mentally ill are systematically seen by the psychiatrist based upon their mental health level i.e., MH 3 (at least once every thirty (90) days and MH 4 (once every 14 days). The institution has eleven (11) MH 4 offenders of which five (5) are on Involuntary Medications. Upon arrival an Intake Evaluation and Individual Treatment Plan is completed. The treatment Plan is reviewed by a treatment team and updated as needed but no later than every six months. Counselors are required to see Chronic Care Clinic offenders at least once every thirty days. All offenders placed on Suicide Watch or Close Observation status require twenty-four hour monitoring and are seen daily until resolution of the presenting issues. Offenders that remain on Suicide Watch for over three days (72 hrs) are considered for a higher level of care. Offender cases that meet criteria are forwarded to the Special Needs Unit (SNU), Social Rehabilitation Unit (SRU), or the Secure Social Rehabilitation Unit (SSRU) for consideration for admissions.

9. What is your greatest challenge in managing this institution?

Effectively addressing staff abuse of attendance procedures is a challenge..

10. What is your greatest asset to assist you in managing this institution?

Staff is our greatest asset in managing South Central Correctional Center.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

SCCC's vehicle fleet is in good shape as vehicles are being replaced when needed. SCCC has several 1999 vehicles utilized by our maintenance department. The oldest vehicle utilized for inmate transportation is a 2004 (SCCC has a car and van of this model year). The vehicle with the highest mileage is a 2001 Chevrolet pickup utilized by our maintenance department with 238,000 miles on it. The average mileage of our fleet utilized for inmate transportation is 120,000.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **Medium. The major complaints staff voice concern health insurance cost and coverage and lack of raises.**

13. Case Managers:

A. How many case managers are assigned to this institution? **SCCC has nineteen (19) Case managers.**

B. Do you currently have any case managers vacancies? **No.**

C. Do the case managers accumulate comp-time? **No.**

D. Do the case managers at this institution work alternative schedules?

Yes, 6:30 a.m. to 3:00 p.m., 7:00 a.m. to 3:30 p.m., 7:30 a.m. to 4:00 p.m., or 8:00 a.m. to 4:30 p.m.

E. How do inmates gain access to meet with case managers?

During their established "open office hours", while making rounds in the housing unit, and/or by submitting their request in writing.

F. Average caseload size per case manager? **144**

• # of disciplinary hearings per month? **30**

• # of IRR's and grievances per month? **20**

• # of transfers written per month? **10**

• # of re-classification analysis (RCA's) per month? **60**

G. Are there any services that you believe case managers should be providing, but are not providing?

South Central Correctional Center Case Management staff are currently providing all essential departmental services currently available.

H. If so, what are the barriers that prevent case managers from delivering these services? **N/A**

I. What type of inmate programs/classes are the case managers at this institution involved in?

Anger Management

ICTC

ICVC

Inside Out Dads

Pathways to Change

Restorative Justice

Substance Abuse

Employability Skills

J. What other duties are assigned to case managers at this institution?

Provide Offender Notary Services

Prepare and hold Administrative Segregation, TASC, Protective Custody, and Initial Classification Hearings

Transitional Accountability Plans

Offender Property Processing

Processing Offender Legal Mail and assist offenders with making legal copies

Processing Green Checks/Personal Property Orders

AICS/RCA's

Re-entry Services

Offender Birth Certificates/Social Security Cards/DOR Identification

Facilitate staff training classes

Facilitate various offender behavior modification programming

Work Release Screening/Applications

Security Inspections

*Assist custody staff with escorts, searches, etc. when needed
Answering offender correspondence
Respond to phone calls and correspondence from offender friends/family members
Conducting Offender Classification file audits
Submitting Requests for Investigation
Writing and Interviewing Offender Conduct Violations
Processing Offender's visiting applications
Screen and assign offenders to Institutional jobs
Offender PREA Screener Assessments
Prepare and hold offender disciplinary hearings
Respond to offender Informal Resolution Requests and Grievances
Process offender custody level scores
Prepare offender transfers
Process Privilege Unit applications
Process Medicaid applications
Retrieval and paperwork processing of offender DNA
Process offender veteran benefits paperwork/applications
Offender room/cell assignment changes
Process offender requests to purchase appliances
Manage/coordinate offender Restorative Justice Activities
Conduct random classification file and individual confinement record audits
Large volume of data entry*

14. Institutional Probation and Parole officers:

- A. How many parole officers are assigned to this institution? **Two (2).**
- B. Do you currently have any staff shortages? **No.**
- C. Do the parole officers accumulate comp-time? **No.**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **Flex their time.**
- E. How do inmates gain access to meet with parole officers?
Open office hours and through written correspondence.
- F. Average caseload size per parole officer?
 - # of pre-parole hearing reports per month? **Eighteen (18).**
 - # of community placement reports per month? **Seven (7).**
 - # of investigation requests per month? **Fifteen (15).**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **None.**
- H. If so, what are the barriers that prevent officers from delivering these services?
- I. What type of inmate programs/classes are the parole officers at this institution involved in?
None.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

South Central Correctional Center does not have any other issues to discuss with or bring to the attention of the members of the Joint Committee on Corrections.

16. Does your institution have saturation housing? If so, how many beds? **Yes, SCCC has sixteen (16) saturation housing beds.**

17. Radio/Battery Needs:

- a.** What is the number of radios in working condition?
SCCC is in the process of installing a new system with 500 new radios and 942 new batteries and 2 new conditioners.
- b.** Do you have an adequate supply of batteries with a good life expectancy? **Yes.**
- c.** Are the conditioners/rechargers in good working order? **Yes.**

Joint Committee on Corrections

December 2014

Information for Legislative Institutional Visits

Facility Name: SOUTHEAST CORRECTIONAL CENTER			
Custody Level	C-5	Warden	Ian Wallace
Total Acreage	120	Address	300 East Pedro Simmons Dr., Charleston, MO 63834
Acreage w/in Perimeter	45		
Square Footage	391880	Telephone:	573-683-4409
Year Opened	2001	Fax:	573-683-7534
Operational Capacity/Count (as of December 1, 2014)	1656/1648		
General Population Beds (capacity and count as of December 1, 2014)	1464/1461	Deputy Warden	Omer Clark
Segregation Beds (capacity and count as of December 1, 2014)	261/250	Deputy Warden	Bill Stange
Treatment Beds (capacity and count as of December 1, 2014)	72/72	Asst. Warden	Paula Reed
Work Cadre Beds (capacity and count as of December 1, 2014)	192/187	Asst. Warden	
Diagnostic Beds (capacity and count as of December 1, 2014)	72/71 ITC Program	Major	Richard Adams
Protective Custody Beds (capacity and count as of December 1, 2014)	72/68		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? **good**
- b. What capital improvement projects do you foresee at this facility over the next six years?**1) Radio system, 2) new security system (computer locking system/server), 3) new Del Norte system, 4) fire alarm system, 5) upgrade sewer bar screen system, 6) perimeter lighting (LED), 7) additional inner perimeter fencing**
- c. How critical do you believe those projects are to the long-term sustainability of this facility?
Very critical. 1) Our current radio system is obsolete scheduled for new system FY15 2) Our current computer system is degrading 3) we have one of the last Del Norte systems available scheduled for a new system FY16 4) Continuous false alarms with fire alarm system, 5) To prevent sewer backups, 6) current lighting system obsolete needs to be replaced with LED lighting (fixtures/bulbs) 7) will enhance security during offender movements.

2. **Staffing:**

- a. Do you have any critical staff shortages? **No; however, a substantial recruitment/retention efforts is utilized to keep us at this rate.**
- b. What is your average vacancy rate for all staff and for custody staff only? **19% All Staff – 21% Custody**
- c. Does staff accrual or usage of comp-time by staff effect your management of the institution? **No**
- d. What is the process for assigning overtime to staff? **This process is in line with the MOCOA agreement. Volunteers are assigned initially. If staff do not volunteer or more staff is needed, the mandatory overtime list is utilized.**
- e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 75% of comp time accrued is paid off; 25% is used.**
- f. Is staff able to utilize accrued comp-time when they choose? **Yes, depending on critical staffing needs, every effort is made to allow time off.**

3. **Education Services:**

- a. How many (and %) of inmate students at this institution are currently enrolled in school? **Voluntary only 2% average**
- b. How many (and %) of inmate students earn their HSE each year in this institution? **1.7%**
- c. What are some of the problems faced by offenders who enroll in education programs?
 - **Low classroom capacity / lack of physical space**
 - **no access to computers and HiSET software that is available**
 - **Inflexible work schedules, particularly in food service**
 - **learning materials have not been updated for the new HiSET curriculum**

4. **Substance Abuse Services:**

- a. What substance abuse treatment or education programs does this institution have?
 - **Learning center (voluntary/assigned**
 - **per Administrative program plan**
 - **substance abuse**
 - **alcoholics anonymous organization**
 - **Intensive Therapeutic Community (ITC)**
- b. How many beds are allocated to those programs? **72 (ITC)**
- c. How many offenders do those programs serve each year?
 - **75 ITC program**
 - **60 substance abuse program**
 - **20 alcoholics anonymous**
- d. What percent of offenders successfully complete those programs?
 - **15% ITC**
 - **80% substance abuse**
 - **alcoholics anonymous does not have graduates, continuing support group**
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting? **Sustainability of program material, after care and tracking.**

5. **Vocational Programs:**

- a. What types of vocational education programs are offered at this institution? **Numerous programs offered via the SECC Learning Center**
- b. How many offenders (and %) participate in these programs each year? **unknown**
- c. Do the programs lead to the award of a certificate? **Yes**

d. Do you offer any training related to computer skills? **pending**

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution? **The MVE wood furniture factory at SECC produces 2 lines of high quality college dormitory furniture and a line of commercial/institutional cabinetry. These three lines of furniture includes, but are not limited to: beds, chairs, dressers, desks, wardrobes, night stands, kitchen and bathroom cabinets, pantries, shelving, athletic taping stations and cedar chests and other misc, furniture manufacture and repair. We also design and build “specials”, or those furniture pieces that are outside of our normal catalog items.**
- b. How many (and %) of offenders work for MVE at this site? **At peak production levels the factory is authorized to employ 115 offenders, Monday through Thursday, 7:00am to 4:15pm. Currently MVE employs 67 offenders, or about 4% of the level 5 population at SECC.**
- c. Who are the customers for those products? **Our customer base consists of all taxed supported agencies, nonprofit organizations, and state employees.**
- d. What skills are the offenders gaining to help them when released back to the community? **The offender workers at this MVE factory are trained in the basic necessities of obtaining and holding a job, such as; Scheduling, teamwork, communication, personal grooming, professional behavior, personal accountability, etc..**

Some specific skills that can be acquired in this MVE location include but are not limited to the following:

- machine set-up and operation,
- furniture making, cabinetry, assembly,
- furniture finishing, spray coating,
- industrial maintenance,
- janitorial, housekeeping
- tool repair,
- shipping and receiving, accounting, storekeeping,
- office machine operations,
- drafting and furniture design,
- CNC router operation, maintenance and repair,
- CNC panel saw; operation, maintenance and repair
- Office management
- Floor lead man

Offender workers at this factory are enrolled in courses in which they can earn certificates for successful completion of the prescribed curriculum in studies including but not limited to the following:

- “Workplace Essential Skills”,
- “Computer Literacy” computer skills that include basic typing, Windows, Word, and Excel, some basic math and higher math.

U.S. Department of Labor Apprenticeship Certificates are also earned in areas such as;

- Cabinetmakers and Bench Carpenters
- Upholsters
- Mechanical Drafters
- Electrical Engineering Technician
- Furniture finishers

- **Industrial Machinery Mechanics**
- **Maintenance and Repair Worker, General**
- **Woodworking Machine Setters, Operators**
- **Multiple Machine Tool Setters, Operators**
- **Welders, Cutters, and Welder Fitters**
- **Painter, Professional**
- **Computer Operators**
- **Sawing Machine Setters, Operators and Tenders**
- **Production Planning and Expediting Clerks**
- **Helpers-Production Workers**
- **Maids and Housekeeping Cleaners**
- **Tool Grinders, Filers, and Sharpeners**
- **Administrative Services Managers**
- **Coating, Painting and Spraying Machine**
- **Information Management**
- **Computer Numerically Controlled Machine Tool**
- **MVE also issues Certificates for “2000 Hours of On the Job Training” in jobs such as those listed above.**

MVE also issues Certificates for “2000 Hours of On the Job Training” in jobs such as those listed above.

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes**
- b. How many offenders are seen in chronic care clinics? **1107 chronic care enrollees**
- c. What are some examples of common medical conditions seen in the medical unit? **Acute complaints such as allergies, colds, sprains and lacerations. As well as, chronic issues such as diabetes and hypertension.**
- d. What are you doing to provide health education to offenders? **We provide education at time of sick call and we have yearly health fairs.**
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **Yes, we had one case. The offender was placed in reverse isolation and followed by the site provider and both local/regional infection control nurses. The site performed contact testing for employees and offenders. The local public health agency performed testing on the visitors with known contact. This process was conducted for two rounds. The first round resulted in two converters and the second round resulted in none. After medication regimen was completed, the offender was released from isolation.**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain **Yes, the aging population is effecting health care in prisons as it is everywhere else. Prison facilities pose special hardships for the older offenders who are frail, who have mobility impairments, hearing and vision loss and cognitive limitations, including dementia; or who have chronic, disabling or terminal illnesses. Prisons were not built for the aging population.**

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?

Offenders have several options in regards to obtaining mental health treatment services. The most commonly used methods to obtain services include:

- **Health Services Request-HSR (all offenders)**
- **Chronic Care Clinic (MH3/MH4; no request necessary)**
- **Staff Referrals and/or Crisis Intervention (all offenders)**
- **Segregation Rounds/Segregation Assessments (Rounds provided for all segregated offenders weekly; Assessments for all offenders in segregation at 30 days in segregation, 90 days after the 30 day assessment, and in 3 month increments post the initial 90 days. Mental Health automatically schedules the appointment, no request necessary.)**

All offenders have access to Health Services Request (HSR) forms on a daily basis. If an offender is seeking mental health treatment (individual or group format), they complete an HSR stating their concern. HSR's are triaged daily by a nurse and the individual is automatically scheduled with the appropriate professional based on their individualized need.

If an offender has a current mental health diagnosis, they are enrolled in Chronic Care Clinic. All offenders are assigned a mental health score based on their level of mental health treatment needs. A rating of MH3 or above indicates that a person has a current mental health diagnosis and may additionally be on medication. Chronic Care Clinic consists of all offenders with a rating of MH3 or above. When someone is in Chronic Care Clinic, they are scheduled every month with a Qualified Mental Health Professional for follow up. They are additionally seen by a psychiatrist a minimum of every ninety (90) days. In addition, they are seen more frequently when involved in a transfer and/or discharge or if having more significant concerns. For example, an MH4 (more severe mental health needs) is typically seen every two weeks by the Qualified Mental Health Professional rather than monthly. Offenders in Chronic Care Clinic are automatically scheduled for these appointments by mental health. If they need services in addition to the Chronic Care Clinic, they submit the HSR form as well.

Offenders with more acute symptoms requiring immediate attention, have the option of informing a staff member of their crisis situation and mental health is contacted. Additionally, a staff member noticing symptoms in an offender has access to a referral form and commonly refers offenders that they believe may need some mental health assistance. Depending on the nature of the staff referral, some individuals are seen immediately and others can be scheduled within the next few days.

Staff members are trained regularly on Suicide Intervention/Prevention during their core training. In this training, staff members are taught what symptoms to look for to identify offenders with possible mental health needs including common indicators that a person may be considering suicide. Any staff member can place an offender on suicide precaution status if concerned that the offender may be suicidal. Mental Health provides 24 hour on call coverage to meet the needs of the institution 7 days per week.

All offenders in segregation are monitored more closely by mental health due to the isolation aspect of segregation. Mental health rounds are conducted on a weekly basis and all offenders in segregation are given the opportunity to talk with a mental health professional during this time. All offenders in segregation are assessed by mental health at

30 days in segregation and every 90 days past the initial 30 day assessment until they are released from segregation. This is in addition to the weekly segregation rounds. Mental Health Staff automatically schedule these appointments for the offender, no request is necessary.

In conclusion, every effort is made in mental health to preserve the continuity of care for all offenders by providing for the easiest access to services possible. Whether it is through involvement in Chronic Care Clinic, counseling services, staff referrals, crisis intervention, segregation assessments, and/or mental health groups, all mental health services are readily available for offenders. Most can be easily accessed through the use of a readily available HSR form.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

No suicides occurred at SECC within the past year. Suicide prevention is a primary focus at SECC. Following any serious suicide attempt, a debriefing meeting is held to review the incident and make any necessary improvements as a result of the incident. All staff are educated on suicide prevention and intervention. Mental health staff facilitate a four (4) hour training to all custody and non-custody staff during their core training week. Medical staff are provided this education during a specified monthly staff meeting set aside to provide education on suicide prevention. All staff have been provided a pocket card that lists signs/symptoms of a potentially suicidal person. The card is carried by the staff member so that it can be referred to when needed. In addition, mental health staff are continually attending trainings and reading literature on suicide prevention and working to improve overall suicide prevention within the institution.

Any offender making statements of self harm or demonstrating suicidal predictors, are placed on suicide precautions where they can be monitored more closely. Any staff member can place an offender on suicide precautions. Mental health is always involved in this process. A Qualified Mental Health Professional assesses the person within two hours during normal business hours. After hours, Mental Health staff are notified and the offender is assessed the next business day. When someone is on suicide precautions, they are placed in a cell with minimal fixtures or protrusions. In HU1 we have cameras mounted in the cell to provide 24 hour observation of the offender. Additionally, custody staff members provide visual observation checks on these offenders at least 5 times per hour, not to exceed 15 minutes between observation checks. Every effort is made to only provide the offender with items that can not be used to harm self until modifications are made by a qualified mental health professional. An offender can only be released from precautions by a Psychiatrist, Psychologist, and/or the Chief of Mental Health Services.

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

Approximately 220 offenders at Southeast Correctional Center or 13%, are on psychotropic medications prescribed through Mental Health.

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

Currently, 227 offenders at Southeast Correctional Center are diagnosed with a mental illness (MH3 or above). Of these, 21 offenders are classified MH4 indicating that they have a chronic or severe mental illness. The majority, 206 offenders, are classified as MH3 indicating moderate mental health needs. The MH4 offenders are provided with an intensive treatment regimen that includes regular follow up monitoring averaging contact with a mental health professional a minimum of every two weeks. This contact is made through the various program components (i.e. Chronic Care Clinic, groups, psychiatric appointments, follow up appointments, etc.).

There are five special units available for offenders with special needs: Special Needs Unit, Social Rehabilitation Unit, Secure Social Rehabilitation Unit, Enhanced Care Unit, and Correctional Treatment Unit. If an offender fits the criteria for any of these units, a referral is made to get the person into the specific unit. If an offender is seriously mentally ill and requires more intensive crisis services then available on site (MH5), he is sent for further treatment at the Biggs Correctional Unit until stabilized.

All offenders have access to mental health services via HSR if additional services are needed. Pre-release planning is provided for continuation of care. Some MH4 Offenders have the opportunity to be a part of the MH4 project which pays for a mental health assessment by the community mental health center prior to release so that the person will have comprehensive follow-up by the community once released.

As previously mentioned, all offenders MH3 and above are seen a minimum of monthly during Chronic Care Clinic and a minimum of every 90 days by the psychiatrist. Services are also provided per HSR form, when in segregation, and on a crisis and/or referral as needed. All Mental Health Clients have a Treatment Plan that is used to clarify their needs and goals. The treatment plan guides what services are needed. This plan is revised as the offenders goals are met or needs change. Thus, the services change as needs change.

In addition, Mental Health offers groups on a weekly basis. Most groups are available to everyone with the exception of a few groups that target a specific population. The following groups are available at this time with a wait list:

- Charting a New Course
- Adjustment to Incarceration
- Anger Management
- Chronic Suicidal Thoughts/Suicidal Behaviors
- Dealing with Feelings
- Depression
- Grief and Loss
- Responsible Parenting
- Sleep Hygiene
- Medication Management
- Cognitive Behavior Therapy
- Trauma
- Thinking Errors
- Understanding Mental Health with Symptom Management
- Aftercare Transition Group (Life After Release)
- Stress Management

- Activities for challenged offenders
- Personal Hygiene for low functioning offenders
- Relapse Prevention
- Effective Communication
- Decision Making
- Anxiety Management
- Personal Hygiene

Southeast Correctional Center Mental Health Department employs two Psychiatrists totaling approximately 30 hours of psychiatric coverage per week. We also have tele-Mental Health services available to provide services during times when a Psychiatrist is not on-site. In addition, a Psychiatrist provides on-call coverage for the state 24 hours a day, 7 days a week. We have two full-time licensed Qualified Mental Health Professionals, one full-time Psychologist, one full-time Psychiatric RN; one full-time Clerk, one full-time Institutional Chief of Mental Health Services, and one part-time Activity Therapist (vacant). We have a QMHP on call 24 hours a day, 7 days a week. The Mental Health Departments works very hard to exceed community standards and provide the best care possible.

9. What is your greatest challenge in managing this institution? **Training/retention of new staff, economic condition and lack of longevity pay exacerbates turnover.**
10. What is your greatest asset to assist you in managing this institution? **My tenured staff. They are the glue holding SECC together, plus the solid leadership among many of my senior managers.**
11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

<u>License #</u>	<u>Vehicle</u>		<u>Mileage</u>	<u>Assigned To</u>	<u>Condition</u>	
32-0235	2008	CHEVY	IMPALA	126,293	POOL	FAIR
32-0250	2008	CHEVY	IMPALA	200,628	POOL	POOR
32-0265	2008	CHEVY	UPLANDER	208,517	POOL	POOR
32-0268	2008	CHEVY	UPLANDER	170,683	POOL	POOR
32-0270	2008	CHEVY	UPLANDER	160,363	POOL	POOR
32-0272	2008	CHEVY	UPLANDER	154,838	POOL	FAIR
32-0286	2008	CHEVY	UPLANDER	171,420	POOL	POOR
32-0294	2008	CHEVY	IMPALA	140,189	POOL	FAIR
13-0298	2007	DODGE	CARAVAN	112,816	POOL	FAIR
13-0377	2008	CHEVY	UPLANDER	102,338	POOL	FAIR
13-0414	2010	FORD	ECONOLINE VAN	36,846	POOL	FAIR
13-0831	2008	CHEVY	UPLANDER	118,564	POOL	FAIR
13-0833	2008	CHEVY	UPLANDER	103,967	POOL	FAIR
13-0856	2014	FORD	ECONOLINE	11,501	POOL	EXCELLENT
13-0902	2008	CHEVY	UPLANDER	187,207	POOL	POOR
13-0423	2007	FORD	CROWN VIC	181,588	POOL	VERY POOR
13-0836	2007	FORD	CROWN VIC	175,398	POOL	POOR
13-0843	2001	Dodge	Ram 1500	76,553	POOL	FAIR
13-0844	2001	Dodge	Ram 2500	83,780	Maintenance	Fair interior/exterior & engine
13-0845	2001	Dodge	Ram 2500	60,395	Maintenance	Fair interior/exterior & engine
13-0847	2001	Ford	F750	39,753	Maintenance	Fair interior/exterior & engine
13-0848	2001	Ford	F150	133,017	Maintenance	Fair interior/exterior & engine
13-0850	2001	Ford	F350	50,291	Maintenance	Fair interior/exterior & engine
13-0853	2008	Ford	Econoline Van	135,803	Pool	Fair interior/exterior & very poor engine
13-0854	2008	Ford	Econoline Van	180,833	Pool	POOR

13-0855	2008	Ford	Econoline Van	51,450	Pool	Fair interior/exterior
13-0857	2008	Ford	Econoline Van	131,233	Pool	Fair interior/exterior
13-0858	2008	Ford	Econoline Van	135,941	Pool	Fair interior/exterior

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **The morale of Custody staff at SECC is medium to high. I receive minimum grievances or IRR's from custody or offenders complaining about the work place. I contribute a lot of this to stopping the rotations of our Captains and Lieutenants and placing them in positions on particular shifts that we as an executive team feel they have the best skills, communication and abilities to supervise that particular group of custody staff. No rotations lock the Captains and Lieutenants to own the good and bad of their shift or area assigned to, instead of passing issues on to the next group of supervisors. There is an increase in communication amongst all staff up and down the chain of command because supervisors are not continuing to change.**

13. Case Managers:

- A. How many case managers are assigned to this institution? **19**
- B. Do you currently have any case managers vacancies? **No**
- C. Do the case managers accumulate comp-time? **When earned, they are expected to flex that week.**
- D. Do the case managers at this institution work alternative schedules? **Yes, at this time they can choose from the following times, 8:00-4:30, 7:30-4:00 or 7:00 – 3:30 No other times as it would affect case management time with offenders in the unit. We also have a CCM who is over programs and will come in during the evening for program reasons.**
- E. How do inmates gain access to meet with case managers? **Daily Office hours, offender correspondence, wing walks appointments and in passing on the walks.**
- E. Average caseload size per case manager? **144 offenders in baseline and 35-72 in administrative segregation.**
 - # of disciplinary hearings per month? **25 (average)**
 - # of IRR's and grievances per month? **18 (average)**
 - # of transfers written per month? **3 (average)**
 - # of re-classification analysis (RCA's) per month? **15 (average)**
- F. Are there any services that you believe case managers should be providing, but are not providing? **No. I believe the classification staff at SECC are currently at maximum potential. They provide programs, an array of services from their offices and they work diligently on release concerns.**
- G. If so, what are the barriers that prevent case managers from delivering these services? **N/A**
- H. What type of inmate programs/classes are the case managers at this institution involved in? **Inside out Dads, Pathways to Change, Behavior Modification Program A, Anger Management, In cell Programming for Administrative Segregation offenders, Liaison/VIC for NAACP, Veterans, Re-entry Efforts, Employability Life Skills, Partnership with Mission Missouri in evenings to assist in successful release, Impact on Crime Victims services, Restorative Justice, and Prison Rape Elimination education, Puppies for Parole, Offenders Offering Alternatives, Enhanced Care Unit training and needs, Protective Custody needs and the Institutional Therapeutic Community.**
- I. What other duties are assigned to case managers at this institution? **Transition Accountability plans, obtaining birth certificates and social security cards, counseling on behavioral issues, PREA risk assessment's, completion of Qualified Legal Claims and various other special needs of the offender, room moves, enemy listings, approximately 200**

administrative segregation hearings a month, and approximately 100 protective custody hearings a month, Identification cards through Department of Revenue, visiting applications and program tracking.

14. Institutional Probation and Parole officers:

- A. How many parole officers are assigned to this institution? **2; 1-POII and 1-POIII/CAO**
- B. Do you currently have any staff shortages? **No, technically “fully staffed”; however, an Institutional Parole Officer is needed due to the present workloads are very high. This issue is being addressed.**
- C. Do the parole officers accumulate comp-time? **Yes, when the need is present.**
- D. Do the parole officers at this institution flex their time, work alternative schedules? **Yes, parole officers are allowed to flex their time and work schedules when necessary to accommodate work loads or personal issues.**
- E. How do inmates gain access to meet with parole officers? **By appointment only. If correspondence is received from an offender, an appointment or response is made for the subject.**
- F. Average caseload size per parole officer? **Current inmate population is 1648**
 - # of pre-parole hearing reports per month? **Between 20-30**
 - # of community placement reports per month? **Between 5-15 (depends)**
 - # of investigation requests per month? **Between 25-50**
- G. Are there any services that you believe parole officers should be providing, but are not providing? **The Parole Release Class is on hold until we get more assistance or workloads change.**
- H. If so, what are the barriers that prevent officers from delivering these services? **Staff being overwhelmed by caseload. If provided, additional assistance will result in better efficiency.**
- I. What type of inmate programs/classes are the parole officers at this institution involved in? **None**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **None**

16. Does your institution have saturation housing? **Yes** If so, how many beds? **16**

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? **487 Operative/31 Inoperative**
- b. Do you have an adequate supply of batteries with a good life expectancy? **We have an adequate amount of batteries but the life expectancy is short. We continue to order new batteries as needed.**
- c. Are the conditioners/rechargers in good working order? **Yes, at this time.**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Tipton Correctional Center				
Custody Level	Minimum		Warden	Douglas J. Prudden
Total Acreage	160		Address	619 N. Osage Ave.
Acreage w/in Perimeter	40			Tipton, MO 65081
Square Footage	320,000		Telephone:	660-433-2031
Year Opened	1916 & 1996		Fax:	660-433-2613
Operational Capacity/Count (as of December 1, 2014)	1222 1206			
General Population Beds (capacity and count as of December 1, 2014)	1124 1117		Deputy Warden	Cybelle Webber, DWOM
Segregation Beds (capacity and count as of December 1, 2014)	98 89		Deputy Warden	Tim Burris, DWO
Treatment Beds (capacity and count as of December 1, 2014)	0		Asst. Warden	Cheryl Scherer
Work Cadre Beds (capacity and count as of December 1, 2014)	Work Release 112 110		Asst. Warden	
Diagnostic Beds (capacity and count as of December 1, 2014)	0		Major	John Shipman
Protective Custody Beds (capacity and count as of December 1, 2014)	0			

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

The overall condition of the physical plant of the institution is fair. All of our systems are working at this time, however; the Del-Norte fence alarm and the Siemens Building Management system (BMS) are obsolete, making replacement or repair parts for these systems hard to find.

b. What capital improvement projects do you foresee at this facility over the next six years?

Replace Perimeter Fence Security System – No parts are available for the Del Norte system currently in use. Replacement of this system is needed to enhance institutional security.

New Roof, Gutters, and Fascia on Buildings 1, 2, 3, 26, and 27 – The shingled roofs are in excess of 25 years old and have failed to remain watertight, resulting in damaged roof, decking, rotted soffits and fascia, rusted vents and guttering.

New Windows in Buildings 1, 2, 3, 26, and 27 – The existing windows are aged. They are no longer weather tight resulting in huge energy loss and uncomfortable living conditions.

New Air Handlers for HU 11-18 (16 total) – They have exceeded their life expectancy.

1. Capital Improvement Needs: (continued)

Replace chillers – The existing chillers have exceeded their life expectancy. Numerous compressor losses, high maintenance costs, and lack of cooling ability make these a candidate for replacement.

Building Management System – Current system is outdated and can't be used effectively.

Run Steam Heating Loop to HU's 11-18 – This would save money as the boilers are oversized and need a load to operate.

c. How critical do you believe those projects are to the long-term sustainability of this facility? All of the above listed items are critical to keeping this institution running. Our Del Norte fence system is currently working, but it is a constant struggle to keep it running. Buildings 1, 2, 3, 26 and 27 received an electrical and fire alarm upgrade, but the roofs and windows are in desperate need of replacement. Our air handlers, chillers, and BAS system have exceeded their life span. With the age of our units, repair costs keep going up.

2. Staffing:

a. Do you have any critical staff shortages?

The facility operates with minimal staffing at all times. However, we have no critical shortages at this time.

b. What is your average vacancy rate for all staff and for custody staff only?

All Staff – Less than 1%; Custody Staff – 9.3%.

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

Yes. Accrual of comp time is a constant concern for management. It is frequently unavoidable to accrue comp time due to the facility having only minimal staffing.

d. What is the process for assigning overtime to staff?

Volunteers are sought first. If sufficient volunteers are not found, then staff are assigned by the use of a seniority based overtime list.

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

Approximately 76% of comp time accrued is paid off; 24% is used.

f. Is staff able to utilize accrued comp-time when they choose?

Yes. However, comp time must be scheduled in advance, like vacation time.

3. Education Services:

a. How many (and %) of inmate students at this institution are currently enrolled in school?

Current enrollment is 249 students out of 282 available E-2 through E-5; which is 88%.

b. How many (and %) of inmate students earn their HSE each year in this institution?

For last year ending June 30, 2014 there were 118 GED/HSE out of 698 students enrolled; which is 17%.

3. Education Services: (continued)

c. What are some of the problems faced by offenders who enroll in education programs?

Many were special education as children and young adults. Many still have learning problems and carry with them failures from past educational experiences. A large number battle alcohol and drug addictions and suffer from brain injuries. Their self esteem and self confidence is low.

4. Substance Abuse Services:

a. What substance abuse treatment or education programs does this institution have?
TCC has Alcoholics Anonymous, Narcotics Anonymous, and Celebrate Recovery. These are educational programs.

b. How many beds are allocated to those programs? NONE
c. How many offenders do those programs serve each year?

Approximately 150 to 200 offenders.

d. What percent of offenders successfully complete those programs?

These are on-going programs with no completion dates.

e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

TCC does not have a substance abuse treatment program.

5. Vocational Programs:

a. What types of vocational education programs are offered at this institution?

TCC offers Graphic Arts and Computer Business Education also known as Web Design. It began the first of April 2014. Prior to that, TCC had Computer Servicing. In November 2014 a volunteer basic computer literacy class funded by a grant was started.

b. How many offenders (and %) participate in these programs each year?

So far this year since April 2014, there have been 32 participate in Web Design.

c. Do the programs lead to the award of a certificate? Yes – Department of Labor

d. Do you offer any training related to computer skills?

Both classes (Web Design and Volunteer Literacy) involve detailed specific computer skills.

6. Missouri Vocational Enterprises:

a. What products are manufactured at this institution?

We have three basic product lines produced by two factories.

Chair Factory: Components and finished product for approximately 35 different models of office task seating.

Shoe Factory: Shoes in standard width (E), wide width (EE), and extra wide width (EEE), ranging in sizes from 2 through 18. Flags include American, Missouri State, POW/MIA, Honor & Remember, Military, DOC, and MU Tiger, as well as indoor flag poles.

b. How many (and %) of offenders work for MVE at this site?

Our levels fluctuate as offenders go home, transfer, etc. Our goal is to staff the Chair Factory at 28, we are currently at 26. The Shoe Factory's goal is 5, currently we have 4.

6. Missouri Vocational Enterprises: (continued)

c. Who are the customers for those products?

Our customer base is primarily tax supported agencies or not for profit organizations. An example of our customers included: State, Court, and Municipal agencies, State employees, Schools, Churches, and other States, etc.

d. What skills are the offenders gaining to help them when released back to the community?

The offenders that we employ learn skills that can be used when released, such as clerical, sewing, upholstery, assembly, and quality control. However, the more important issue is that they learn the behaviors needed to work a job after release. These would include following safety instructions, being at work on time, taking breaks and returning on the time, being paid for a work, following work instructions, and producing a quality product, etc.

7. Medical Health Services:

a. Is the facility accredited by the National Commission on Correctional Health Care? YES
b. How many offenders are seen in chronic care clinics?

936 enrollments in chronic care, approximately 668 individual offenders as most are enrolled in more than one clinic.

c. What are some examples of common medical conditions seen in the medical unit?

Cardiovascular issues are the number one medical condition, including high blood pressure. Diabetes, pulmonary issues, such as asthma, seizures, and finally the results of altercations between offenders.

d. What are you doing to provide health education to offenders?

Health Fair provided annually, general health education during sick call; chronic care and infectious disease nurses provide education with visits, medication counseling done by providers and nurses.

e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? NONE

f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain YES

More co-morbidity, more elderly/weaker patients, multiple issues for same individual. More medications required, more healthcare visits, including outside institutional visits and hospital stays. However, we are also seeing an increase in the handicapped population of younger offenders with more paraplegia, or other special health issues at this camp with our change in January 2014 to a medical level 4.

8. Mental Health Services:

a. How do offenders go about obtaining mental health treatment services?

Offenders request services with use of a Health Services Request form or by staff referral.

b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? 0

Suicide Intervention/Prevention Training is provided to TCC staff alternating years for custody and non-custody. Information is provided to offenders during Health Fairs. At risk offenders are monitored for safety and provided therapy for learning skills to more effectively manage their symptoms of depression.

8. Mental Health Services: (continued)

c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? .08%

d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

About 1% of offenders at TCC are seriously mentally ill. Offenders are referred for psychiatric services if they suffer from serious mental illness and receptive to treatment. If they are resistant to services they are referred if their condition deteriorates or safety concerns are present. Offenders are classified as needing a higher level of care and transferred to a facility that can pursue involuntary medication as deemed necessary. Therapy is provided for continued assessment of the offender's needs and to assist the offender with better understanding their needs.

9. What is your greatest challenge in managing this institution?

The greatest challenge I have experienced so far in managing this facility is trying to maintain a safe, secure environment within the institution with a relatively small cadre of Corrections Officers. With such a limited security force, staff absences result in routinely holding staff beyond their shift to ensure adequate coverage of the most critical posts.

10. What is your greatest asset to assist you in managing this institution?

I believe the greatest asset I have in managing the facility is the tremendous reservoir of experience possessed by the staff of Tipton Correctional Center. Most of the employees have been here for a number of years and are very competent in performing their duties. The overall morale of the staff is, in my opinion, slightly better than at most facilities and may account for the lower staff turnover rate. Thus creating relatively high levels of experience among the staff.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

LICENSE #	YEAR	VEHICLE	MILEAGE
13-0434	2004	Tahoe	95703
13-0435	2008	Ford Van	46273
13-0436	2010	Crown Vic	62042
13-0438	1996	Maint Vehicle	14057
13-0442	2008	Ford Van	43268
13-0443	1995	Back up Vehicle Patrol	152455
13-0444	1995	Maint Vehicle	63047
13-0445	2006	Crown Vic	120874
13-0446	2007	Crown Vic	121662
13-0455	1996	Maint Vehicle	51219
13-0452	2007	Ford Van	44049
13-0454	2007	Vehicle Patrol	121801
13-0456	2007	Crown Vic	114112
13-449	1998	Handicap Van	92568
13-0448	1997	Maint Vehicle	9751
13-0703	2014	Ford Van	2902
13-0907	1989	Trash Truck	37111
32-0295	2008	Chevy Van	103683
32-0224	2008	Impala	126407
32-0262	2008	Chevy Van	81944

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

Morale among custody and all other staff is rated as fair considering the minimal staffing levels and lack of within grade raises.

13. Case Managers:

A. How many case managers are assigned to this institution?	19
B. Do you currently have any case manager vacancies?	NO
C. Do the case managers accumulate comp-time?	NO
D. Do the case managers at this institution work alternative schedules?	

YES to accommodate programming.

E. How do inmates gain access to meet with case managers?

Through scheduled and unscheduled meetings.

F. Average caseload size per case manager?	100 offenders per Case Manager
• # of disciplinary hearings per month?	18 per Case Manager
• # of IRR's and grievances per month?	6 per Case Manager
• # of transfers written per month?	3 per Case Manager
• # of re-classification analysis (RCA's) per month?	35 average

G. Are there any services that you believe case managers should be providing, but are not providing?

NO

H. If so, what are the barriers that prevent case managers from delivering these services? N/A

I. What type of inmate programs/classes are the case managers at this institution involved in?

Classification staff facilitates Impact of Crime on Victims class, Pathways to Change, Inside/Out Dads, Anger Management, Employability Skills/Life Skills, Restorative Justice Projects, and attend community meetings involving offender reentry. One of the two Restorative Justice projects is an in-house project creating coloring books, which involves issuing and tracking materials by the Classification staff. TCC's Puppies for Parole program is monitored by a Case Manager as well.

J. What other duties are assigned to case managers at this institution?

Offender job and housing assignment, process offender grievances, offender disciplinary hearings, offender reclassification, general counseling, process institutional transfers, offender release preparations, process offender requests to withdraw funds, visiting applications, and property issues. Case Manager staff also perform Transitional Accountability Plans and Prison Rape Elimination Act related requirements.

14. Institutional Probation and Parole Officers:

A. How many parole officers are assigned to this institution?	5
B. Do you currently have any staff shortages?	NO
C. Do the parole officers accumulate comp-time?	Only minimal accumulation
D. Do the parole officers at this institution flex their time, work alternative schedules?	

1 Parole Officer works an alternative schedule to accommodate late open door hours for work release offenders. The rest work traditional schedules.

14. Institutional Probation and Parole Officers: (continued)

E. How do inmates gain access to meet with parole officers?

All IPO's have set open door hours when offenders can ask questions.

F. Average caseload size per parole officer?	Approximately	300
• # of pre-parole hearing reports per month?	Approximately	50
• # of community placement reports per month?	Approximately	15
• # of investigation requests per month?	Approximately	60

One parole officer does not have a caseload assigned. Her primary job duty is completing pre-hearing reports.

G. Are there any services that you believe parole officers should be providing, but are not providing? NO

H. If so, what are the barriers that prevent officers from delivering these services?

I. What type of inmate programs/classes are the parole officers at this institution involved in? NONE

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. NONE

16. Does your institution have saturation housing? If so, how many beds? YES–96 Beds

17. Radio/Battery Needs:

- a. What is the number of radios in working condition? 254
- b. Do you have an adequate supply of batteries with a good life expectancy? YES
- c. Are the conditioners/rechargers in good working order? YES

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Western Missouri Correctional Center December, 2014			
Custody Level	C-2/Medium	Warden	Heath Spackler
Total Acreage	385	Address	609 East Pence Road Cameron MO 64429
Acreage w/in Perimeter	54		
Square Footage	96 (cell)	Telephone:	816 632-1390
Year Opened	1988	Fax:	816 632-2562
Operational Capacity/Count (as of December 1, 2014)	1958 / 1943		
General Population Beds (capacity and count as of December 1, 2014)	1760/1760	Deputy Warden	Krista Helton, Offender Management
Segregation Beds (capacity and count as of December 1, 2014)	198/183	Deputy Warden	Lori Lakey, Operations
Treatment Beds (capacity and count as of December 1, 2014)	N/A	Asst. Warden	Mark Parkhurst
Work Cadre Beds (capacity and count as of December 1, 2014)	200/35	Asst. Warden	N/A
Diagnostic Beds (capacity and count as of December 1, 2014)	N/A	Major	CSII John Lower
Protective Custody Beds (capacity and count as of December 1, 2014)	N/A		

1. Capital Improvement Needs:

- a. How would you rate the overall condition of the physical plant of the institution? **Average for the age of the institution.**
- b. What capital improvement projects do you foresee at this facility over the next six years?
 - **Remove failing skylights and replace with new structural framing capable of supporting standing seam metal roofing. (Approved but not funded)**
 - **Replace 27 year old cooling coils and chillers for Administration Building and Central Services. (Funded)**
 - **Replace 27-year old heating coils throughout the institution.**
 - **Replace existing emergency generator and related switch gear.**
 - **High mast lighting on perimeter fence and yard lights/energy efficient; perimeter and yard lights – very dark and unsafe for staff and offenders.**
 - **Paint interior and exterior of 500,000 gallon water tower.**
 - **Renovate floor under skylights in Administration Building after they have been replaced with standing seam metal roofing.**

- **Resurfacing roads and parking lots (lots are in terrible shape – need to be completely resurfaced).**
- **Housing unit cell windows – leak air badly and we have been putting plastic over the inside of the windows during winter months for the last 10 years. They are rusted out and need to be replaced.**
- **Energy efficient windows throughout the institution.**
- **Repair and/or replace sidewalks**

c. How critical do you believe those projects are to the long-term sustainability of this facility? **Vital, the facility is now approximately 27 years old and the above mentioned projects are necessary to keep the facility in good working order to ensure the safe and secure housing of offenders assigned to the facility.**

2. **Staffing:**

- Do you have any critical staff shortages? **No.**
- What is your average vacancy rate for all staff and for custody staff only? **Vacancy rate for all staff 2.8% and for custody staff it is 3.3%.**
- Does staff accrual or usage of comp-time by staff effect your management of the institution? **Yes, excessive amounts of overtime accrual can lead to staff burnout and possible loss of the employee.**
- What is the process for assigning overtime to staff? **We have a voluntary and a mandatory overtime procedure in place.**
- Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off? **Approximately 72% of comp time accrued is paid off; 28% is used.**
- Is staff able to utilize accrued comp-time when they choose? **Yes**

3. **Education Services:**

- How many (and %) of inmate students at this institution are currently enrolled in school? **We have a total of 571 offenders enrolled in school. This is approximately 30% of the total population as of 12/3/2014.**
- How many (and %) of inmate students earn their HSE each year in this institution? **We have had 69 students earn their HSE as of 12/3/2014. Ten (10) more offenders are taking the HSE Test as of 12/3/14. This is approximately 16% of the students currently enrolled in class.**
- What are some of the problems faced by offenders who enroll in education programs? **Offenders have to prepare for a new test this year since we no longer use the GED test. They have a limited amount of time to prepare for the HSE Test. They only get about 12 hours of class time per week if there is not a holiday. It takes a long time to stay on task in class or when you take the HSE, and their attention spans are sparse. There are other obligations within the institution that take time away from studying.**

4. Substance Abuse Services: N/A

- a. What substance abuse treatment or education programs does this institution have?
- b. How many beds are allocated to those programs?
- c. How many offenders do those programs serve each year?
- d. What percent of offenders successfully complete those programs?
- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution? **We offer 9 vocational education programs: Applied Computer Technology; Auto Mechanics; Building Trades; Diesel Mechanics; Residential Wiring; Modern Woodworking; Residential Plumbing; Small Engine Mechanics; and Basic Welding.**
- b. How many offenders (and %) participate in these programs each year? **As of 12/3/14 approximately 444 students have participated in the VTS programs. That is about 23% of the offenders (444/1939).**
- c. Do the programs lead to the award of a certificate? **Yes. All WMCC Vocational Education courses are certified by the Department of Corrections and the Department of Labor. Upon completion of the course students receive a Certificate of Completion from the Department of Corrections, a Department of Labor Certificate and number, and a Certificate of Completion from NCCER (National Center for Construction Education and Research). The applied Computer Technology students have the opportunity to become certified in an area of Microsoft Office ie: Word, Excel, PowerPoint, and for advanced students, Access.**
- d. Do you offer any training related to computer skills? **Yes. WMCC offers an Applied Computer Technology program. This class offers instruction with Microsoft Windows and Office.**

6. Missouri Vocational Enterprises: N/A

- a. What products are manufactured at this institution?
- b. How many (and %) of offenders work for MVE at this site?
- c. Who are the customers for those products?
- d. What skills are the offenders gaining to help them when released back to the community?

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care? **Yes.**
- b. How many offenders are seen in chronic care clinics? **1,118**
- c. What are some examples of common medical conditions seen in the medical unit? **Cardiovascular disease, seizure disorders, pulmonary disease, diabetic related conditions.**
- d. What are you doing to provide health education to offenders? **Annual Health Fair, education of chronic care management, nutrition awareness healthy choices.**

- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond? **No.**
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain. **Yes, with the aging process individuals are developing multiple chronic care diseases that have to be managed.**

8. **Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services? **Health Services Request (HSRs).**
- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides? **None.**
- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? **290 (15.20%).**
- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them? **211 offenders were in the chronic care clinic at the beginning of December. These offenders are scheduled an appointment psychology (psychiatrist or nurse practitioner) at least once every 90 days. They are also scheduled an appointment with a QMHP at least once every 30 days. Medication monitoring is done through the psych nurse.**

9. What is your greatest challenge in managing this institution? **As with many other facilities, WMCC has been asked to maintain operations with fewer resources. The aging physical plant requires more repairs and upkeep which increases the demands on the E & E and Maintenance budgets. Many repairs are at the point they have become capital improvements. The Administrative team and staff often "think outside the box" to ensure that adequate services are provided and that we stay within our given budgets.**

10. What is your greatest asset to assist you in managing this institution? **The staff at WMCC are the greatest asset I have in managing this facility. As fewer resources are available and correctional operations have become more complex they consistently rise to the challenge.**

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

LICENSE #	VEHICLE	MILEAGE	CONDITION	USAGE
13-0121	2007 CAGED 15 VAN	138555	GOOD	INMATE TRAN.
13-0157	2014 CAGED 15 VAN	9793	GOOD	INMATE TRAN.
13-0160	1997 RAM 1500 4x4	92240	GOOD	MAINTENANCE
32-0296	2008 IMPALA	109702	GOOD	POOL
13-0462	2005 CAGED 15 VAN	174604	FAIR	INMATE TRAN.
13-0463	1997 1 TON 4X4	34093	FAIR	MAINTENANCE
13-0464	2009 BUS CAGED	170934	GOOD	INMATE TRAN.
13-0465	1999 FULL SEDAN	210813	FAIR	PERIMETER
13-0466	1995 MINI 6VAN	83941	BAD	DOG TEAM (INOPERATABLE)
13-0467	2008 UPLANDER CAGED	208584	GOOD	INMATE TRAN.
13-0468	2007 CAGED HANDICAP	67827	GOOD	INMATE TRAN.

LICENSE #	VEHICLE	MILEAGE	CONDITION	USAGE
13-0469	1998 JEEP UTIL 4X4	142003	GOOD	DOG TEAM
13-0470	1999 DODGE 250 4X4	67150	GOOD	MAINTENANCE
13-0472	1988 GMC DUMP TRUCK	25436	POOR	MAINTENANCE
13-0473	2008 UPLANDER CAGED	112397	GOOD	INMATE TRAN.
13-0475	1988 FORD FLAT BED 2T	152343	BAD	MAINTENANCE
13-0476	2014 CAGED 15 VAN	7758	GOOD	INMATE TRAN.
13-0477	2003 CAGED 15 VAN	197752	GOOD	GROUNDS
13-0478	2008 UPLANDER CAGED	194074	GOOD	INMATE TRAN.
13-0479	2005 CAGED 15 VAN	149195	FAIR	INMATE TRAN.
13-0481	2006 CAGED FULL SEDAN	126112	GOOD	INMATE TRAN.
13-0503	2007 CAGED FULL SEDAN	100320	GOOD	INMATE TRAN.
13-0505	2005 CAGED FULL SEDAN	185688	FAIR	PERIMETER
13-0590	2014 BUS CAGED	5095	GOOD	INMATE TRAN.
13-0643	2006 MINI CAGED 7 VAN	148130	GOOD	INMATE TRAN.
13-0776	2010 SEDAN FULL	79732	GOOD	POOL
13-0934	2002 SEDAN FULL	54653	POOR	INMATE TRAN.
13-0935	2005 CAGED 15 VAN	180822	FAIR	INMATE TRAN.
13-0932	2008 F150 2X4	22719	GOOD	MAINTENANCE
13-0939	2001 DODGE CARAVAN	191113	GOOD	GROUNDS

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **The morale at Western Missouri Correctional Center is currently assessed at an overall level of medium. There is currently only one (1) Corrections Supervisor I vacancy and 5 Corrections Officer I vacancies. There are several reasons contributing to this rating including staff with FMLA and/or unscheduled leave and daily mandatory overtime due to absences. Custody staff frequently has to provide coverage for positions such as Laundry and Cooks which increases the need to work additional staff.**

13. Case Managers:

- A. How many case managers are assigned to this institution? **23**
- B. Do you currently have any case managers vacancies? **Yes.**
- C. Do the case managers accumulate comp-time? **No.**
- D. Do the case managers at this institution work alternative schedules? **No.**
- E. How do inmates gain access to meet with case managers? **Open door hours or by appointments.**
- E. Average caseload size per case manager? **One case manager per 100 offenders.**
 - # of disciplinary hearings per month? **29**
 - # of IRR's and grievances per month? **8 IRRs; 3 Grievances**
 - # of transfers written per month? **4**
 - # of re-classification analysis (RCA's) per month? **Approximately 10 per case manager.**
- F. Are there any services that you believe case managers should be providing, but are not providing? **No.**
- G. If so, what are the barriers that prevent case managers from delivering these services? **N/A**

H. What type of inmate programs/classes are the case managers at this institution involved in? **Anger Management, Inside-Out Dads, Therapeutic Community, Impact of Crime on Victims, Pathways to Change, and Puppies for Parole.**

I. What other duties are assigned to case managers at this institution? **Process offender visiting applications, job changes, room moves and offender transfers. Complete Transitional Accountability Plans by meeting with offenders to discuss their assets/liabilities and develop a plan for successful release and providing community contacts. Conduct disciplinary hearings, investigate and complete Informal Resolution Requests/Grievances. Work with other sections to ensure the offender's needs are met. Conduct wing tours and complete inspections of working areas. Assist custody staff with wing inspections, cell searches, etc. Maintain the offender classification files. Communicate with offender families/friends when they call with issues and concerns. Assigned to task groups and sit on Interviewing Committees. Work with the community on Restorative Justice Projects. Facilitate classes, hold open door times, Restorative Justice Garden, RCAs, PREA Assessments/AICS, Acting for the Functional Unit Manager, processing Birth Certificates (MRP), managing Qualified Legal Claim paperwork, act as Committee Members, review files for Work Release criteria.**

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution? **6 POIIs, 1 POIII, 1 DA**

B. Do you currently have any staff shortages? **No.**

C. Do the parole officers accumulate comp-time? **No.**

D. Do the parole officers at this institution flex their time, work alternative schedules? **We have two IPOs who work 4, ten hour days.**

E. How do inmates gain access to meet with parole officers? **Open door is held once a week, in the a.m. and p.m., or offenders can write their IPO.**

F. Average caseload size per parole officer?

- # of pre-parole hearing reports per month? **15 – 20 per IPO.**
- # of community placement reports per month? **6 per IPO.**
- # of investigation requests per month? **15 – 20 per IPO.**

G. Are there any services that you believe parole officers should be providing, but are not providing? **No.**

H. If so, what are the barriers that prevent officers from delivering these services? **N/A**

I. What type of inmate programs/classes are the parole officers at this institution involved in? **We provide monthly, 2 day pre-release classes which includes various outside resources. In addition, we have IPOs involved in the Community MRP group, RECESS.**

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections. **Staff salaries.**

16. Does your institution have saturation housing? If so, how many beds? **N/A**

17. Radio/Battery Needs:

- What is the number of radios in working condition? **We have 290 radios which have been in service for approximately 2 years.**
- Do you have an adequate supply of batteries with a good life expectancy? **Yes.**
- Are the conditioners/rechargers in good working order? **Yes.**

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: Western Reception Diagnostic & Correctional Center (WRDCC)			
Custody Level	C 1-5	Warden	Ryan Crews
Total Acreage	158 (Approx.)	Address	3401 Faraon St.
Acreage w/in Perimeter	71 (Approx.)		St. Joseph, MO 64506
Square Footage	All Buildings – 720,000	Telephone:	816-387-2158
Year Opened	1999	Fax:	816-387-2217
Operational Capacity/Count (as of December 23, 2014)	1968/2001		
General Population Beds (capacity and count as of December 23, 2014)	846/740	Deputy Warden	Richard Stepanek
Segregation Beds (capacity and count as of December 23, 2014)	136/118	Deputy Warden	Sherie Korneman
Treatment Beds (capacity and count as of December 23, 2014)	595/555	Asst. Warden	Ryan Brownlow
Work Cadre Beds (capacity and count as of December 23, 2014)	None	Asst. Warden	Vacant
Diagnostic Beds (capacity and count as of December 23, 2014)	440/409	Major	Chris Brewer
Protective Custody Beds (capacity and count as of December 23, 2014)	None		

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

Good

What capital improvement projects do you foresee at this facility over the next six years?

1. *Replace roof, flashing, guttering and install metal siding to old Cold Storage building (#29403).*
2. *Install additional perimeter fence and gate to enclose building #'s 29410 & 29409 inside the perimeter.*
3. *Replace roof on Laundry building (#29405).*
4. *Replace roof on Education/Whse/Canteen building (#29407).*
5. *Replace roof, tuck-point, waterproof and replace guttering on IIS building (#29418).*
6. *Replace fire alarm system in R&D building (#29438).*
7. *Repair brick and concrete in utility tunnels.*
8. *Tuck-point and waterproof HU#1 (#47011).*
9. *Upgrade existing 120/208v electrical system in HU#11 (#29400).*
10. *Replace roof on old state garage (#470006).*

11. *Tuck-point, waterproof and replace windows in Education building (#29407).*
12. *Replace two (2) 2100 gallon water heaters in the Powerhouse (#29404).*
13. *Tuck-point, waterproof and replace windows in old state garage (#29406).*
14. *Tuck-point, waterproof and replace windows in the Maintenance building (#29417).*
15. *Replace air handlers in HU#1 (#29411).*
16. *Install new fire detection system, HVAC and electrical service to ILS building (#29418).*
17. *Replace electrical overhead drops to underground service, install new 1200 amp service main panel and transformer at the Maintenance building (#29417).*
18. *Apply six (6) inch asphalt overlay to maintenance access road.*
19. *Repair and overlay asphalt roadways, perimeter road and parking lots, re-stripe main parking area.*
20. *Remove/demolition of Progress Hall (#29416).*
21. *Build new multipurpose building where Progress Hall is.*

b. How critical do you believe those projects are to the long-term sustainability of this facility?
Very critical.

2. **Staffing:**

a. Do you have any critical staff shortages?

Vacancies: 2 Cook II, 1 COI, 1 CSI, 1 CCM, 1 Boiler Operator, 2 FUM, 1 OSA-K, 1 ROI, 1 SOSA, 1 SAC II.

Corrections Officers and Cook positions are always hard to fill because very few applicants are on the register. In my opinion due to staffing levels, each vacancy would be critical.

b. What is your average vacancy rate for all staff and for custody staff only?

There is an average vacancy rate for all staff of 12.66% and 12.19% for custody staff.

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?

Yes, the accrual/usage of compensatory time presents a daily challenge to custody supervisors in order to minimize accruals as well as grant staff leave time off in a manner which ensures adequate daily staffing while accommodating staff requests for leave.

d. What is the process for assigning overtime to staff?

The vast majority of overtime accrued is the result of holidays. The earned overtime is primarily accrued in areas such as transportation runs. All other overtime accrued by staff is assigned first by requesting volunteers and then by assignment based on inverse seniority if no volunteers are found.

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?

Approximately 56% of comp time accrued is paid off; 44% is used.

f. Is staff able to utilize accrued comp-time when they choose?

Every effort is made to accommodate staff requests. In most cases, staff utilize accrued compensatory time on dates of their choice based on the needs of the facility.

3. Education Services:

- a. How many (and %) of inmate students at this institution are currently enrolled in school?
 - *We have a total of 60 offenders enrolled in school. This is approximately 14% of the general population as of 12/9/14.*
 - *The Treatment center has 147 students enrolled in school on a part time basis. This is approximately 28% of the treatment population*
- b. How many (and %) of inmate students earn their HSE each year in this institution?
 - *We have had a total of 35 offenders obtain their HSE, which is 6% of those enrolled, as of December 9, 2014 for 2014. The treatment center has had a total of 71 offenders obtain their HSE (14% of those enrolled) as of December 9, 2014.*
- c. What are some of the problems faced by offenders who enroll in education programs?
 - *There is not enough time at WRTC; students only get about 6 hours per week.*
 - *They are on their way home so motivation can be an issue.*
 - *It takes a long time to stay on task in class or when you take the HSE and their attention spans are sparse.*
 - *There are other obligations within the institution that takes time away from their studying.*
 - *Conflict with other required programs*
 - *Entry level academic skills*
 - *Low self-esteem related to educational history*
 - *Family and social stressors*
 - *Mental disorders*
 - *Medical conditions*

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?

Partial Day Treatment Program WRDCC has treatment programs run Division of Offender Services and Gateway, a contract provider. The following programs are offered.

 - *180-OUT, Offenders Under Treatment, 6 Month Program*
 - *BSAP, Board Ordered 6 Month Program*
 - *120-Day Treatment, Court and Board Ordered*
 - *Post Conviction Treatment*
 - *84 Day Parole Violator Treatment*
 - *120-Day Court Ordered Detention Sanction Program (CODS)*
 - *Partial Day Treatment Program*
- b. How many beds are allocated to those programs?
 - *BSAP, Board Ordered 6 Month Program (Gateway) - 135*
 - *180-OUT, Offenders Under Treatment, 6 Month Program (DORS) - 45*
 - *120-Day Treatment (Gateway) - 140*
 - *120 Day/Post Conviction/Parole Violator/CODS (DORS)-275*
 - *Partial Day Treatment Program (Gateway) - 50*
- c. How many offenders do those programs serve each year?
 - *BSAP, Board Ordered 6 mo. Program (Gateway) - 311 (July 2013 to July 2014)*
 - *180-OUT, Offenders Under Treatment, 6 mo. Program (DORS) - 551*

- **120-Day Treatment (DORS)-1859**
- **120-Day Treatment (Gateway) – 559 (July 2013 to July 2014)**
- **Post Conviction Treatment (DORS)-243**
- **Post Conviction Treatment (Gateway)-60**
- **84 Day Parole Violator – 905**
- **CODS -(DORS)-354**
- **CODS-(Gateway)-76**

d. What percent of offenders successfully complete those programs?

- **BSAP, Board Ordered 6 mo. Program (Gateway) - 86%**
- **120-Day Treatment (Gateway) - 93%**
- **120-Day Treatment (DORS) – 99%**
- **180-OUT, Offenders Under Treatment, 6 mo. Program (DORS) – 98%**
- **Post Conviction Treatment (DORS) – 98%**
- **Post Conviction Treatment (Gateway)-99%**
- **84 Day Parole Violator – 99%**
- **CODS (DORS)-98%**
- **CODS (Gateway)-98%**

e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

Establishing a level of trust to deal with issues of the clients' former lifestyles. Breaking through the denial of the seriousness of a client's substance abuse/dependency and criminal lifestyle is a task. Management of the MH-3 / MH-4 clients and dual diagnosed offenders. The biggest challenge at this time is receiving a higher number of disruptive, young and challenging offenders than in the previous years. We appear to be getting higher custody level offenders with a more violent past. Also, consistency among staff is also a huge challenge. It is often difficult to get all of the staff on the same page and keeping it continually consistent due to constant changes.

5. Vocational Programs:

a. What types of vocational education programs are offered at this institution?
WRDCC does not have any vocational programming

b. How many offenders (and %) participate in these programs each year?
N/A

c. Do the programs lead to the award of a certificate?
N/A

d. Do you offer any training related to computer skills?
No

6. Missouri Vocational Enterprises:

a. What products are manufactured at this institution?
None

b. How many (and %) of offenders work for MVE at this site?
None

- c. Who are the customers for those products?
N/A
- d. What skills are the offenders gaining to help them when released back to the community?
N/A

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care?
Yes
- b. How many offenders are seen in chronic care clinics?
Approximately 300 a month are for routine chronic care visits by either nursing or physician.
- c. What are some examples of common medical conditions seen in the medical unit?
Back pain, athlete's foot, sinus congestion, sports injuries, heartburn.
- d. What are you doing to provide health education to offenders?
Annual health fair, education during nursing and provider appointments, pamphlets available in medical waiting rooms, occasional use of offender information channel (TV).
- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?
No active cases of TB have been identified in the facility.
- f. Is the aging of the population effecting health care in prisons as it is effecting health care every where else? If yes, please explain.
Yes, however most aged offenders have a higher medical score than can be accommodated at WRDCC, so we have not seen a significant effect in population.

8. Mental Health Services:

- a. How do offenders go about obtaining mental health treatment services?
Upon arrival at WRDCC R&D unit, every offender responds to questions on an Intake Mental Health Screening form completed by a medical nurse. Offenders arriving with verified psychotropic medication have an immediate face to face evaluation with a Qualified Mental Health Professional (QMHP). A QMHP is a Missouri Licensed Psychologist, Counselor, or Social Worker. There is a suicide risk potential that also provides an immediate face to face evaluation.

In the medical screening room, there is a large copy of a Medical Service Request (MSR). During the Mental Health Intake, offenders are again educated on the MSR process. The Mental Health Intake is a structured clinical interview that determines Mental Health Level and need of services. The Intake is conducted between day 5 & 14 of the Diagnostic process.

The Referral and Screening Note (RSN) may be completed and submitted by any staff member, which again results in an individual encounter with a QMHP. All QMHP's have a caseload of Mental Health 3 offenders and also to handle emergency services, as needed

in their assigned housing units. In the evenings and on weekends and holidays, QMHP's rotate on-call to ensure 24 hour coverage for all offenders.

Staff in various housing units refer offenders to a variety of Mental Health groups ranging from Adjustment to Incarceration, Anger Management and Trauma Groups.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

There have been no completed suicides since WRDCC opened in 1999. There is close communication between DOC staff and Mental Health, with a very proactive approach regarding intervention. All WRDCC staff attend CORE training yearly. Suicide Prevention training includes information and education including risk factors.

Mental Health now has 9 single camera cells which are monitored by custody not less than 4 times an hour. We also have access to 2 additional camera cells in the TCU.

QMHP's have daily contact with the Offender to evaluate the level of risk and supervision needed with custody providing timely and relevant information by documentation in the chronology file, as well as informing mental health of their observations to assist in modifications for the offenders on suicide watch.

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications? 410 (20.67%)

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

There are 9 (MH 4) offenders in the diagnostic center at this time that are seen weekly to monitor stability/symptoms of mental illness. They are also referred, as criteria applies, to the Social Rehabilitation Unit (SRU) at FCC, The Special Needs Unit (SNU) at PCC, or the Secure Social Rehabilitation Unit (SSRU) at JCCC.

Offenders who are at risk in general population due to mental illness can be placed on Close Observation pending transfer or assimilation to general population with symptom management.

Offenders with acute psychiatric symptoms that meet criteria as an imminent risk of harm to self and/or others and other criteria may be referred by the psychiatrist for a Due Process and Involuntary Medication Hearing. No Involuntary Medication Hearings were held this year.

All offenders with a Mental Health diagnosis participate in the creation of an Individual Treatment Plan to identify problems and goals. These offenders are placed in Mental Health Chronic Care. These offenders meet with a QMHP at least once a month and sooner if needed. They have regular appointments with a staff psychiatrist and a psychiatric nurse. In addition to regular appointments with the psychiatrist, there is an Advanced Practice Nurse, and a Psychiatric RN.

WRDCC has also been chosen as one of 3 diagnostic centers to participate in a new sentencing statute for several mentally ill offenders with a 120 Mental Health Treatment Program in conjunction with Department of Mental Health, Jackson County and Probation and Parole.

9. What is your greatest challenge in managing this institution?

The most challenging part is the overall management of the facility's workforce and the aging physical condition of many of the facility's buildings. Given the budgetary constraints and staffing reductions it is increasingly challenging to ensure appropriate maintenance of infrastructure and necessary staffing for adequate monitoring of all institutional functions. This can have an impact on staffs' working conditions and overall morale.

10. What is your greatest asset to assist you in managing this institution?

The staff are the greatest asset, followed by the support provided by the Division's executive staff. The facility's executive staff, section heads, and shift commanders continue to make it possible to manage the institution in a safe and effective manner.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

Fleet Vehicles

Mileage as of December 1st, 2014

7 Crown Vic.	Mileage	Year	Status
13-0010	103,352	2007	Inmate Trans.
13-0025	95,355	2007	Inmate Trans.
13-0352	172,345	2003	Perimeter Patrol
13-0396	93,923	2006	Inmate Trans.
13-0705	165,592	2004	Perimeter Patrol
13-0724	82,033	1998	Specialty Cert
13-0792	80,157	2008	Inmate Trans.

6 Max Vans

13-0268	111,723	2006	Inmate Trans/Sec. Cage
13-0278	174,868	2007	Inmate Trans.
13-0346	159,173	1997	Inmate Trans. Handicap
13-0394	201,659	2006	Inmate Trans.
13-0730	83,729	1998	Specialty Cert
13-0872	9,430	2014	Inmate Trans.

1 Bus

13-0101 1,658 2015 *Inmate Trans.*

3 Mini Vans

13-0675	189,415	2008	Inmate Trans.
13-0677	183,743	2008	Inmate Trans.
32-0259	176,358	2008	Inmate Trans.

4 Impalas

13-0233	117,263	2008	Pool
13-0239	118,770	2008	Pool
13-0242	116,535	2008	Pool
13-0246	117,844	2008	Pool

1 Suburban

13-0707 **50,699** **1999** ***Specialty Cert***

Vehicle 13-0332 Crown Vic. went to ERDCC so we could get new 15 Passenger Van 13-0872. Vehicle 13-0372 International Bus went to BCC so we could get new Blue Bird Bus 13-0101.

Vehicle 13-0346 Handicap Van is out-of-service due to a wreck.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

Staff morale would be rated as medium; due in part to the reduction in staff over the last several years and lack of cost of living raises. They have also been required to do more because of less staff. Most take pride in what they do and continue to perform their duties in a professional manner. Each has an opinion as to the problems within the department from health care benefits to the working conditions of being constantly short staffed, with that they continue to perform all assigned duties and bring credit to themselves and this institution.

13. Caseworkers:

A. How many caseworkers are assigned to this institution?

- *Grievance Office - 1 Corrections Case Manager Housing Unit #1(Treatment) - 4 Corrections Case Managers , 1 Corrections Classification Assistant*
- *Housing Unit #6 (Transitional Housing Unit and Work Release) - 6 Corrections Case Managers, 1 Corrections Classification Assistant, 1 Institutional Activity Coordinator*
- *Housing Unit #10 (Diagnostic Center) - 1- Corrections Case Manager III , 8- Corrections Case Managers*
- *Housing Unit #10 (Administrative Segregation) - 2- Corrections Case Managers*
- *Housing Unit #11(General Population) - 6 – Corrections Case Managers, 1 - Corrections Classification Assistant*
- *Grievance Office - 1 Corrections Case Manager*

B. Do you currently have any caseworker vacancies?

No

C. Do the caseworkers accumulate comp-time?

Yes, but we encourage the use of flex scheduling to avoid accumulation of any overtime.

D. Do the caseworkers at this institution work alternative schedules?

No.

E. How do inmates gain access to meet with caseworkers?

Through an open-door policy, by submitting written request, or by being placed on a call-out list.

F. Average caseload size per caseworker?

Approximately 71 Offenders to 1 Caseworker.

- # of disciplinary hearings per month?
 - *Housing Unit #1 – 125.1 monthly average*
 - *Housing Unit #6 – 74.5 monthly average*
 - *Housing Unit #10 – 114.8 monthly average*
 - *Housing Unit #11 – 120.8 monthly average*

- # of IRR's and grievances per month?
 - *Housing Unit #10 – 19 monthly average*
 - *Housing Unit #1 – 6.3 monthly average*
 - *Housing Unit #6 – 15.1 monthly average*
 - *Housing Unit #11 – 27.2 monthly average*
 - *Grievances (entire facility) – 30.6 monthly average*
 - *810 Total IRRs for 2014*
 - *337 Total Grievances for 2014*
- # of transfers written per month?
 - *Housing Unit #1 – 4.3 monthly average*
 - *Housing Unit #6 – 10.2 monthly average*
 - *Housing Unit #11 – 15.7 monthly average*
 - *Housing Unit #10 - averages 0 (Transfers do not include those offenders sent out of the Diagnostic Center to other facilities; only transfers written and submitted to Central Transfer Authority.)*
- # of re-classification analysis (RCA's) per month?
 - *Housing Unit #1 – 17.7 monthly average*
 - *Housing Unit #6 – 37.5 monthly average*
 - *Housing Unit #11 – 26.8 monthly average*
 - *Housing Unit #10 - 227 RCA's/ICA's monthly average (This includes diagnostic offenders)*

G. Are there any services that you believe caseworkers should be providing, but are not providing?

No

H. If so, what are the barriers that prevent caseworkers from delivering these services? *N/A*

I. What type of inmate programs/classes are the caseworkers at this institution involved in?

Pathways to Change, Impact of Crime on Victims Class, Inside Out Dads, Anger Management.

J. What other duties are assigned to caseworkers at this institution?

Notary services, classification file reviews, process all visiting forms, process death and critical illness notices, make all housing and job assignments, case management team member, Offender External Classification, TAP (Transitional Accountability Plans), contacting outside agencies for referral services, possible enemy/protective custody investigations, order supplies and maintain inventory for housing units, back-up for custody staff, searches and counts, attend mandatory meetings (Medical, Fire/Safety), provide daily counseling to offenders, diagnostic processing, PREA risk assessments, offender orientation, process offender order forms, escort offenders to video court, process applications for offender work release and fill in as acting Functional Unit Manager when needed. Required to obtain 30 hours of training per year.

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution?

13 POII's, 1 POIII

B. Do you currently have any staff shortages?

Waiting to fill one position which should occur soon.

C. Do the parole officers accumulate comp-time?

On rare occasions.

D. Do the parole officers at this institution flex their time, work alternative schedules?

Yes

E. How do inmates gain access to meet with parole officers?

Open door, callouts, and written correspondence

F. Average caseload size per parole officer? **140**

- # of pre-parole hearing reports per month? **90**
- # of community placement reports per month? **30-40**
- # of investigation requests per month? **190-210**

G. Are there any services that you believe parole officers should be providing, but are not providing?

No

H. If so, what are the barriers that prevent officers from delivering these services?

N/A

I. What type of inmate programs/classes are the parole officers at this institution involved in?

Two officers are trained for Pathways to Change and two are trained for Anger Management.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

I would mention that the last few years have been difficult for corrections, as I am sure it has been for many other agencies. Staffing reductions have impacted workload and budget cuts have made it difficult to replace aging equipment or appropriately complete building maintenance, all of which impacts working conditions and morale. Salaries and benefits are also big concerns for staff. The price of consumer products and durable goods has gone up; however, there has only been modest cost of living increases in the last few years. An increasingly higher number of staff are faced with the decision to change their standard of living or find part time employment. Changes to benefit plans over the years have also increased out of pocket expenses, adding to the financial challenges staff are experiencing. Although this has not changed the last two years, there is still a degree of anxiety about the future. Many have left State service for higher paying positions and/or better benefits in order to support their families. This results in staffing shortages which can be difficult to overcome due to the aforementioned reduced staffing. All of this compounds the struggles we face with the recruitment and retention of skilled staff.

16. Does your institution have saturation housing? If so, how many beds?

Housing Unit #10 has 286 saturation/temporary beds.

17. Radio/Battery Needs:

- What is the number of radios in working condition? **430**

- b. Do you have an adequate supply of batteries with a good life expectancy? ***Yes***
- c. Are the conditioners/rechargers in good working order? ***Yes***

Joint Committee on Corrections

Information for Legislative Institutional Visits

Facility Name: <i>Women's Eastern Reception, Diagnostic and Correctional Center</i>			
Custody Level	<i>C-1 to C-5 Female</i>	Warden	<i>Angela Mesmer</i>
Total Acreage	<i>117</i>	Address	<i>1101 East Hwy 54</i>
Acreage w/in Perimeter	<i>47</i>		<i>Vandalia, MO 63382</i>
Square Footage	<i>420,231</i>	Telephone:	<i>(573) 594-6686</i>
Year Opened	<i>1997</i>	Fax:	<i>(573) 594-6789</i>
Operational Capacity/Count (as of December 1, 2014)	<i>1,560/1,807</i>		
General Population Beds (capacity and count as of December 1, 2014)	<i>1,532/1,297</i>	Deputy Warden	<i>Tom Dunn Offender Management</i>
Segregation Beds (capacity and count as of December 1, 2014)	<i>48/25</i>	Deputy Warden	<i>Todd Francis Operations</i>
Treatment Beds (capacity and count as of December 1, 2014)	<i>300/227</i>	Asst. Warden	<i>Deborah Miller</i>
Work Cadre Beds (capacity and count as of December 1, 2014)	<i>54/38</i>	Asst. Warden	<i>N/A</i>
Diagnostic Beds (capacity and count as of December 1, 2014)	<i>200/220</i>	Major	<i>John Gibbs</i>
Protective Custody Beds (capacity and count as of December 1, 2014)	<i>N/A</i>		

1. Capital Improvement Needs:

a. How would you rate the overall condition of the physical plant of the institution?

I would rate the condition of the facility as good. The structures themselves seem to be aging well. The electronic systems of the facility, such as the perimeter fence security system, the lighting system and the building automated system, are to their limits. Parts, software and components are becoming harder to find or are obsolete.

b. What capital improvement projects do you foresee at this facility over the next six years?

- *Replacement of the Del Norte perimeter security system*
- *Replacement of Microlite system*
- *Replacement of Building Automated system*
- *Replacement of steam and hot water boilers*
- *Replacement of chillers and cooling tower*
- *Replacement of refrigerant units in food service*
- *Resurface of parking lots and perimeter road*
- *Clean and paint water tower*

c. How critical do you believe those projects are to the long-term sustainability of this facility?
I would grade these projects as very critical. Without replacement of electronic systems, we are moving closer to a major system breakdown. We are using systems that are no longer supported and the components are no longer available. Replacement of power plant equipment and refrigeration units would make the facility more efficient and comply with energy-saving mandates. The parking lots and water tower projects are vital to retain them as usable and structurally sound.

2. Staffing:

a. Do you have any critical staff shortages?
No, due to departmental recruitment efforts, we have not had any staff shortages thus far, however, custody hiring pool levels are very low and hiring for 2015 Custody Staff may be impacted.

b. What is your average vacancy rate for all staff and for custody staff only?
We average 9 openings per month with 7 of those being custody positions.

c. Does staff accrual or usage of comp-time by staff effect your management of the institution?
Yes, it is difficult to keep the facility fully staffed and keep comp-time to a minimum. In addition to staff shortages, we accumulate overtime due to absenteeism, transporting offenders on out count appointments, hospital supervision and training. A weekly report is submitted by each shift that reports the number of overtime hours earned and the justifications for those hours. Whenever possible, staff members who earn overtime are given an equivalent amount of time off before the end of the week to eliminate overtime accumulation.

d. What is the process for assigning overtime to staff?
When overtime is required to staff positions, volunteers are asked for first. Volunteers sign up to work overtime in advance on signup sheets located in the airlock, in front of the Control Center. If a post cannot be filled through request for volunteers, overtime is mandated utilizing seniority list broken down by shift and rank (CO I's, CO II's) with the lowest seniority to the highest. When a staff member works overtime, they are moved from the top of the list to the bottom (staff has to work at least two or more hours in order to qualify and be moved to the bottom of the list). Staff may volunteer at any time to work overtime to move their name down on the list. The seniority list is posted on the staff bulletin board next to radio and key issue, which is accessible to staff 24 hours a day, 7 days a week. The list is updated daily by the shift timekeepers.

e. Approximately what percentage of the comp-time accrued at this institution does staff utilize as time off and what percentage is paid-off?
Approximately 74% of comp time accrued is paid off; 26% is used.

f. Is staff able to utilize accrued comp-time when they choose?
Yes, when staffing permits.

3. Education Services:

a. How many (and %) of inmate students at this institution are currently enrolled in school?
There are 366 (23%) of inmate students currently enrolled in school at WERDCC.

b. How many (and %) of inmate students earn their HSE each year in this institution?
There are 110 (31%) of inmate students that earn their HSE each year at WERDCC.

c. What are some of the problems faced by offenders who enroll in education programs?

d. What are some of the problems faced by offenders who enroll in education programs?
One problem faced by offenders who enroll in education programs is attempting to coordinate school with the other classes and programs that the offenders either participate in

voluntarily or are mandated to participate. The offender's self-esteem is an issue. If they believe they are capable, they will progress. Many of the offenders simply do not want or care about their education.

4. Substance Abuse Services:

- a. What substance abuse treatment or education programs does this institution have?
Substance Abuse treatment is contracted and provided by Gateway Foundation. The program is a Therapeutic Community based model; clients receive group counseling, individual counseling, education groups and peer groups.

- b. How many beds are allocated to those programs?

A total of 240 beds are allocated to the Treatment Program: 90 Long Term (includes year long and 6 month offenders) and 150 Short Term (ITC, CODS, 120 Treatment, PV84).

- c. How many offenders do those programs serve each year?

In FY14, approximately 727 clients were served.

- d. What percent of offenders successfully complete those programs?

In FY14, 93.12% were successfully discharged from the program.

- e. What, in your opinion, is the biggest challenge to running a treatment program in a prison setting?

The primary challenge in running a treatment program in a prison setting is working around the institution's schedule: canteen, count, med-line, and various other activities which interfere with the daily schedule. Department of Corrections and Gateway staff work together to minimize interruptions as much as possible to provide a continuation of services. Another challenge in the institution is physical space. We offer many valuable treatment services, which are often conducted simultaneously, making it a challenge to find space for the necessary programs.

5. Vocational Programs:

- a. What types of vocational education programs are offered at this institution?

Women's Eastern Reception, Diagnostic and Correctional Center offers the following vocational education programs: Business Technology, Professional Gardening, Certified Nurse's Assistant, Cosmetology and Building Trades.

- b. How many offenders (and %) participate in these programs each year?

During FY14, this department saw 207 students (unduplicated). 131 of them completed their classes. We still had 59 of the 207 as students at the end of FY14.

- c. Do the programs lead to the award of a certificate?

All of the programs receive Department of Labor Certificates. Offenders can earn a Certiport Certificate upon completion of the Business Technology class, if they receive a reasonable score on their Certiport test. Cosmetology students may be allowed to take their state board examination so that they may be licensed cosmetologists when they are released. And, the Building Trades students receive NCCER certification if they complete the class successfully. We are seeking other certification for the remaining two classes.

- d. Do you offer any training related to computer skills?

Yes, the Business Technology class offers computer skills during the entire class.

6. Missouri Vocational Enterprises:

- a. What products are manufactured at this institution?

Lab coats, hospital scrubs (tops and bottoms), visiting room jackets, broadcloth pajamas (men's and women's), mu-mu gowns, hospital gowns, seersucker robes with snaps, fleece robes with ties, T-shirts (with or without pockets, short and long sleeve or sleeveless), jersey or twill shorts, jersey lounge pants, fleece jackets, fleece pants, sweatshirts, sweatpants,

thermal tops, thermal pants, twill work pants, inmate work shirts and pants, sport shirts, work shirts, dress shirts, maintenance and food service shirts, kitchen towels, terry bath towels, washcloths, bed sheets (flat and fitted), pillowcases, fleece blankets, thermal blankets, suicide vest, garment hangers, canteen bags with pocket, mesh hygiene bags, screen printing and boxer briefs.

- b. How many (and %) of offenders work for MVE at this site?

We have a budget that allows 150 offenders to be employed for MVE, which would be 8.34% of the population; however, we currently have 144 offenders employed for MVE, which would be 8% of the population.

- c. Who are the customers for those products?

The customers are City, State or Government organizations including offender canteen, any tax exempt entity, such as hospitals, churches and schools, and state employees.

- d. What skills are the offenders gaining to help them when released back to the community?

We teach all sewing skills required in the manufacture of clothing and related products. We teach how to lie out and cut patterns with the most efficient use of material. We also teach safe operating skills, preventative maintenance including needle changes, and minor repair of machines. In addition, their exposure to this workplace will afford a smooth transition in the community workplace. Offenders learn accepted practices that will allow them to interact more easily when employed in the community. Offenders are awarded certificates as they meet the 2,000-hour requirements and are recognized by the Department of Labor when they accumulate 4,000 – 6,000 hours.

7. Medical Health Services:

- a. Is the facility accredited by the National Commission on Correctional Health Care?

Yes, the facility is accredited by the NCCHC.

- b. How many offenders are seen in chronic care clinics?

Approximately 1,450 offenders are enrolled in the chronic care clinics.

- c. What are some examples of common medical conditions seen in the medical unit?

Some of the common medical conditions seen in the medical unit include colds, allergies, headaches, backaches, menstrual cramping, constipation and urination problems.

- d. What are you doing to provide health education to offenders?

Informational pamphlets are located in the hallway and in the lobby for access by offenders. Additionally, an annual health fair is hosted for offenders.

- e. Have you had any cases of active Tuberculosis in this facility in the past year? If so, how did you respond?

No, we did not have any cases of active Tuberculosis in the past year.

- f. Is the aging of the population effecting health care in prisons as it is effecting health care everywhere else? If yes, please explain.

The aging population is affecting the health care in our prison system. We also notice the use of drugs is significantly affecting this, combined with the age. Dental services are seeing the majority of their patients with complications due to the usage of methamphetamine, which is increasing the pain and also the number of patients that need to be seen. The offender population so many times has not had any prior medical care that was continuous or interrupted. We are also seeing patients that have been diagnosed with a medical condition but did not follow through upon discharge and returns to the institution still needing services for the original diagnosis.

8. **Mental Health Services:**

- a. How do offenders go about obtaining mental health treatment services?

Offenders access mental health services via several avenues. They may send a Health Services Request (HSR) directly to Mental Health. They may also speak with custody or classification staff about their needs. Corrections staff may send a referral to mental health on behalf of offenders. At times, staff members call directly to the Mental Health Chief to request services; particularly if it is of an urgent nature.

- b. How many successful suicides (and %) occurred here in the past year and what is being done to prevent suicides?

There have been no successful suicides at WERDCC during the past year. Corrections staff are trained in suicide prevention. Behaviors and/or verbalizations that may indicate suicidal ideation are taken very seriously. Suicide Watch protocol is followed for every reported incident of suicidal thought or behavior.

- c. Approximately how many (and %) of the offenders in this institution are taking psychotropic medications?

On average, about one third (33%) of the offenders at WERDCC are prescribed psychotropic medications. Currently 574 offenders are prescribed psychotropic medication.

- d. How many offenders in this facility are chronically or seriously mentally ill and what is being done for them?

Approximately one third of the offenders at WERDCC are diagnosed with a chronic or serious mental illness. A fully staffed mental health department including psychiatrists, nurse practitioner, mental health nurse, activity therapist, and licensed qualified mental health practitioners, provides daily and on-call/emergency mental health services to the offenders. Of special interest is the Women's Social Rehabilitation Unit (WSRU). Offenders who struggle to maintain in general population are admitted into the WSRU. The goal of the WSRU is to help offenders build resiliency and critical life skills which will enhance their abilities to function in general population as well as in society.

9. What is your greatest challenge in managing this institution?

The challenges of managing compensatory time, hiring and retaining quality employees and maintaining good staff morale for employees who do not receive adequate pay.

10. What is your greatest asset to assist you in managing this institution?

Just as managing staff is one of the greatest challenges, they are also, without a doubt the most valuable asset. The teamwork exhibited by staff and Executive support are invaluable.

11. What is the condition of the facilities' vehicle fleet? (mileage, old vehicles etc?)

Four Crown Victorias have 160,000 miles (2007)

Two Uplanders have 154,000 miles with excessive interior wear (2008)

One 15-passenger van has 62,000 miles (2012)

One handicap van has 55,000 miles (2007)

Two used Crown Victorias have 91,000 miles (2010)

One pool vehicle Chevrolet Impala has 97,000 miles (2008)

We have 2 vehicle patrol cars with 187,000 (2006) and 176,000 (2007) miles.

We have 4 maintenance trucks with mileage below 43,000 miles and range in model years 1994 to 1998.

One 12-passenger Chevrolet Express van with 106,000 miles (2008)

Two 15-passenger 2014 Ford F-350 vans with 20,000 miles

The four 2007 Crown Victorias and the two 2008 Chevrolet Uplanders have reached the mileage range for being removed and replaced from offender transport duties.

Two vehicle patrol cars will need replacement within the next 6 months due to the fact they average 3,000 miles each month.

If the 2007 Crown Victorias assigned to offender transportation are replaced, two of these vehicles could be transferred to vehicle patrol.

One 1997 Ford F-250 maintenance truck needs to be replaced due to frame and body deterioration. This has been caused by the vehicle being used for snow and ice removal. It has had a snow plow and a full size salt spreader mounted in the bed for 17 years during the winter months.

12. Assess the morale of your custody staff; high, medium, or low and please provide detailed explanation. **(Please have the Major answer)**

Corrections is a dynamic career field and correctional custody officers and supervisors will readily carry out the directives necessary to implement the changes required in our dynamic work environment. However, some of these same staff persons are often notoriously slow to truly embrace certain types of changes. For some, this initial lack of support for the change can lead to temporary periods of resentment and to a corresponding, short-term dip in morale. For example, a recent change which has negatively impacted morale here is the matter of the agency offender pat-search standard; specifically, that male custody officers are no longer permitted to conduct routine pat searches of female offenders; however, I believe that as custody staff slowly accept this standard as the new norm, its corresponding impact on morale will fade.

A chronic issue which affects morale is the need to assign officers mandatory overtime. Overcrowding in the diagnostic unit here and the need to staff a juvenile unit have contributed to abnormally high overtime recently and we cannot know when these circumstances will change. Presumably, as the need for mandatory overtime is reduced we will also experience a corresponding increase in positive morale.

Certainly, there are many, many custody officers and supervisors here who consistently display the attributes typically associated with "high" morale – they maintain a positive attitude; they are confident of their abilities; they conduct themselves according to established standards as pertains to offender-management and other expectations; they feel sufficiently empowered to carry out the duties associated with their position and routinely perform at a level above the minimum expected; and they rarely miss work.

It is my personal belief that our administration has a genuine interest in identifying and addressing matters pertaining to morale. All administrative-team members have an open-door policy; we routinely use data collected from exit interviews and other sources to identify and address action items related to morale matters; we have recently formed a focus group to identify and address correctional officer concerns; we have stopped the shift rotation for our captains so as to introduce more stability and accountability on the individual shifts; and we have continually stressed the need for custody supervisors to uphold standards pertaining to professional interaction with their subordinate employees.

*I firmly believe that the overall facility culture here can best be described as **positive**. I also believe that despite an active and changing environment which routinely results in the need for our custody staff to grapple with difficult challenges from year to year, on the whole, morale here is good, and often, very good.*

13. **Case Managers:**

A. How many case managers are assigned to this institution?

We have 33 case managers and 2 classification assistants assigned to WERDCC.

B. Do you currently have any case manager vacancies?
No, we do not.

C. Do the case managers accumulate comp-time?
No, they do not.

D. Do the case managers at this institution work alternative schedules?
Yes, many case managers now work four, ten-hour days instead of five, eight-hour days.

E. How do inmates gain access to meet with case managers?
Offenders may gain access to meet with case managers through daily open door hours, wing walks, general appointments, offender correspondence, teaming violations, Transitional Accountability Plan meetings, counseling and making referrals to Mental Health and Medical.

F. Average caseload size per case manager?
On average, the caseload is 36 per case manager.

- # of disciplinary hearings per month?
On average, we have 224 disciplinary hearings per month.
- # of IRR's and grievances per month?
On average, we have 32 IRRs and 11 grievances per month.
- # of transfers written per month?
On average, we have 32 transfers per month.
- # of re-classification analysis (RCA's) per month?
On average, we have 233 transfers per month.

G. Are there any services that you believe case managers should be providing, but are not providing?
Our staff members are providing all necessary services at this time. Currently, classification staff members conduct programs on Impact of Crime on Victims, Pathway to Change and Anger Management. Other duties assigned to classification staff, but not limited to, are custody support, investigations, and counseling.

H. If so, what are the barriers that prevent case managers from delivering these services?
Not applicable.

I. What type of inmate programs/classes are the case managers at this institution involved in?
Impact of Crime on Victims Classes, Restorative Justice, Pre-Release, Canine Helpers Allow More Possibilities (CHAMPS), Women's Social Rehabilitation Unit, Peer Action Care Team, Project Reach, Hospice, Beauty for Ashes, Pathway to Change, Anger Management, Money Management, Making Peace with your Past, Pre-Release and Celebrate Recovery.

J. What other duties are assigned to case managers at this institution?
Job coordinator, processing visiting applications, key management, counseling offenders, criminal histories, offender payroll, death notices, Transition Accountability Plans, work release applications, investigations, organize room moves, file audits, notary service, bed assignments, vendor orders, court returns processed, facilitate outside phone calls with Department of Family Services and attorneys, GRA's, and PREA screeners, supply requests, mental health referrals, medical referrals, chaplain referrals, escorting visitors for programs/classes, 4-H Life Program, Adult Internal Risk Assessment, Library Relief, Restorative Justice Gardens and other duties as assigned.

14. Institutional Probation and Parole officers:

A. How many parole officers are assigned to this institution?
We have 11 Institutional Parole Officers, 1 Unit Supervisor, 1 District Administrator, 3 Office Support Assistants (Keyboarding) and 1 Senior Office Support Assistant.

B. Do you currently have any staff shortages?
Yes, we have two vacant positions for Institutional Parole Officer.

C. Do the parole officers accumulate comp-time?

No. At the current time, staff is allowed to utilize compensatory time as they acquire it by flexing hours.

D. Do the parole officers at this institution flex their time, work alternative schedules?

Yes, they are encouraged to flex their time in order to not accumulate excessive compensatory time.

E. How do inmates gain access to meet with parole officers?

Offenders submit correspondence to the Institutional Parole Officer in their housing unit and, as time permits, the Institutional Parole Officers have open door meetings. The general population units try to have two open door sessions per week. Also, the Institutional Parole Officers schedule appointments and call the offenders out to interview them for necessary reports prior to due dates. This is done automatically on the part of the parole officer. During the R&O orientation, two parole officers alternate talking to the offenders during an open forum-type setting and go over probation and parole rules. A packet of information is handed out to each offender during receiving that covers probation and parole issues and who to contact with questions.

F. Average caseload size per parole officer?

For the general population parole officers, their caseload is the entire housing unit, averaging around 256 offenders. The specialized caseloads, treatment and violator units are less, but still average around 175 to 200 offenders.

- # of pre-parole hearing reports per month?

There are approximately 87 pre-parole hearing reports per month.

- # of community placement reports per month?

There are approximately 18 community placement reports per month.

- # of investigation requests per month?

There are approximately 118 investigation requests per month.

G. Are there any services that you believe parole officers should be providing, but are not providing?

The parole officers at WERDCC are not participating that much in programs or classes at the present time. Our main focus is on providing a high volume of reports to the Courts and Board, which mainly consumes our time. It would be nice if we could be more involved in Pathway to Change and pre-release programs.

H. If so, what are the barriers that prevent officers from delivering these services?

At the present time, our adjusted average work unit per officer is 210 when the average should be 173 work hours per officer. We have a high volume of reports that are due to the Courts and Board with time sensitive due dates.

I. What type of inmate programs/classes are the parole officers at this institution involved in?

At this time, the parole officers are not involved in inmate programs/classes.

15. Please list any other issues you wish to discuss or bring to the attention of the members of the Joint Committee on Corrections.

Not applicable.

16. Does your institution have saturation housing? If so, how many beds?

Yes, approximately 100 beds.

17. **Radio/Battery Needs:**

a. What is the number of radios in working condition?

At WERDCC, 283 radios are in working condition.

b. Do you have an adequate supply of batteries with a good life expectancy?

Yes, we have an adequate supply of batteries with a good life expectancy.

c. Are the conditioners/rechargers in good working order?

Yes, the conditioners/rechargers are in good working order.